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# **ALCOHOL SAFETY PROGRAM PROGRESS**

U.S. DEPARTMENT OF TRANSPORTATION  
NATIONAL HIGHWAY TRAFFIC  
SAFETY ADMINISTRATION  
WASHINGTON, D.C. 20590

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VOLUME 2 STATE PROGRAM PROGRESS

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VOLUME 2 STATE PROGRAM PROGRESS

**Alcohol Safety  
Program Progress**

**Volume 2  
State Program Progress**

**Contents**

v	Foreword	43	Nebraska
1	Alabama	45	Nevada
2	Alaska	47	New Hampshire
3	Arizona	49	New Jersey
4	Arkansas	51	New Mexico
5	California	52	New York
7	Colorado	54	North Carolina
9	Connecticut	55	North Dakota
10	Delaware	57	Ohio
12	District of Columbia	59	Oklahoma
14	Florida	61	Oregon
15	Georgia	63	Pennsylvania
17	Hawaii	65	Puerto Rico
19	Idaho	67	Rhode Island
20	Illinois	69	South Carolina
21	Indiana	71	South Dakota
23	Iowa	72	Tennessee
25	Kansas	74	Texas
27	Kentucky	76	Utah
28	Louisiana	78	Vermont
30	Maine	79	Virginia
32	Maryland	81	Virgin Islands
34	Massachusetts	82	Washington
35	Michigan	83	West Virginia
36	Minnesota	85	Wisconsin
37	Mississippi	87	Wyoming
39	Missouri	89	Glossary
41	Montana		

# FOREWORD

In 1970, the National Highway Traffic Safety Administration (NHTSA) launched a major national alcohol countermeasures program to deal with the drunk driver problem. One of the most important objectives of this undertaking was to stimulate States and communities to expand the coverage and improve the effectiveness of individual efforts to reduce drunk driving as a major factor in traffic crashes.

Thirty-five federally-funded Alcohol Safety Action Projects (ASAP's) in as many States formed the nucleus of NHTSA's program. Nine began operations in January 1971, twenty in January 1972, and a final group of six initiated operations between July 1 and October 1, 1972. The ASAP's were based on a new concept of the nature of the drinking driver problem. The concept used a systems approach to this problem, surrounding the problem drinker with a set of countermeasures designed to identify him on the road, make appropriate decisions regarding his punishment and/or rehabilitation, and then take action to make sure these measures are put into effect.

Federal-aid highway safety funds (Section 402) and grants from the National Institute of Alcohol Abuse

and Alcoholism, Department of Health, Education and Welfare, and the Law Enforcement Assistance Administration, Department of Justice, have been used to expand existing activities and to provide initial financing of new alcohol countermeasure activities in the States. Successful programs are now being financed with local and State revenues and fees.

Since legislation and programs directed at the drunk driver are constantly changing and are managed by many agencies and political jurisdictions, detailed documentation of each individual improvement in each State and community would be a voluminous task. This report focuses on general indications of progress that have been established since 1970, recognizing that new improvements are continually emerging.

The report, Alcohol Safety Program Progress, is comprised of two volumes. Volume I addresses the nature and scope of the national program and summarizes key progress by countermeasure area. Volume II, prepared from material obtained by the NHTSA Regional Offices, summarizes progress of the State programs.

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# ALABAMA

The Office of Highway and Traffic Safety (OHTS) is responsible for coordinating the State's Highway Safety Program. This coordination is exercised through the offices responsible for funding highway safety projects proposed by the principal agencies, such as the State Highway Patrol, Department of Education, Department of Court Management, and the Department of Health. The coordination considers the alcohol traffic safety problem on a statewide basis and uses State agencies to assist local governments. From 1967 through 1976, the OHTS has invested approximately \$1.25 million of highway safety funds into alcohol traffic safety programs.

The State Highway Patrol has undertaken a selective enforcement program under a project awarded from the Office of Highway and Traffic Safety. Special patrols are posted at sites where accident volume/accident rates are overrepresented. To further assist the Patrol in driving while intoxicated (DWI) enforcement, two chemical breath-test vans have been purchased with Federal highway safety funds. These vans are in addition to the regular breath-test units in operation at various State and local police headquarters. Since the start of the selective enforcement effort in 1970, DWI arrests have increased from 18,522 in that year to 35,353 by 1976.

The Office of Court Management, in conjunction with OHTS, has initiated the following statewide alcohol-related programs:

- DWI Court Referral Program
- Alcohol Information and Education Program
- Judicial Traffic Safety Educational Program

During 1976, over 200 county and municipal traffic court judges were trained at judicial traffic safety and traffic court educational workshops. In addition, 22 judges have attended seminars conducted by the American Bar Association (ABA) Traffic Court Division, the National College of the State Judiciary, and other nationally-recognized training institutions.

The Judicial Article Implementation Act of 1976 permits discretionary sentencing of persons convicted of DWI. The DWI Court Referral Program is intended to be a supplement to statutory punitive measures. This program provides information on the consequences of drinking and driving, with an emphasis on the scientific and logical rationale for separating the two. At the end of 1976, 21 mental health centers provided limited problem-drinker driving courses serving 67 counties.

For those offenders with severe alcohol problems, the Department of Mental Health has established a comprehensive alcohol treatment program. This program has the goal of providing comprehensive alcohol treatment through local mental health authority boards mandated by law to provide these services.

The State Department of Education recommends that each driver education instructor present, as a minimum, one alcohol unit (4 hours) of instruction within the traditional driver education program. The Alcohol and Drug Unit of the Education Department is responsible for ensuring that alcohol and drug education takes place at all grade levels. In this effort, the NHTSA's K-12 alcohol curriculum has been used as a resource guide to strengthen the State's existing curriculum.

The State Department of Education sponsors alcohol education courses for teachers. A teacher may receive 3 semester hours of credit in alcohol education in the State-sponsored course. Also, the State sponsors State Driver Education Alcohol Enrichment Workshops. One semester hour of credit can be earned for attending these workshops.

The Department of Public Safety is responsible for the Public Information Program. Information, in the form of news releases and interviews, is supplied to all news media. Appearances before groups of all kinds are made by Public Safety Officers. The Department also distributes films and other information on traffic safety.

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# ALASKA

Alaska's comprehensive alcohol countermeasures program has been modeled after the federally-funded ASAP's in other States.

The State has a full-time alcohol coordinator attached to the Alaska Highway Safety Planning Agency, part of the Department of Public Safety.

Violator detection continues to be enhanced by the purchase of video taping equipment for all of the major police agencies of the State. In addition, breathalyzers have been provided to major police agencies. Training in the use of this equipment is provided through the Alaska State Troopers Training Academy. The City of Anchorage currently is using Federal highway safety funds for the implementation of selective enforcement alcohol patrols.

The basic improvement in the judicial system has been in the presentence investigation (PSI) area. This has come about as a result of computerized, driving-history records at the State driver licensing authority

easily accessible to the courts. In addition, a better case-calendaring system allows the alcohol-related traffic offender to be processed more effectively than in the past. To keep judicial officials informed about DWI matters, magistrates and prosecutors have participated in alcohol training seminars which have increased their knowledge and their abilities to deal with the alcohol-related traffic offender.

The Greater Anchorage Area Courts have assumed coordination of a court referral and rehabilitation screening center. Individuals convicted of operation of motor vehicle while under the influence (OMVUI) are referred directly to this center for evaluation and rehabilitation.

Each school district sets up its own traffic safety education curriculum. As a rule, most curriculums offer about 2 hours of classwork on alcohol-related driving subjects. To aid in this, the State driver education section conducts in-service alcohol safety education training as part of an overall driver education program for secondary school driver education instructors.

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# ARIZONA

The Office of Highway Safety (OHS) serves as the statewide agency for the coordination of alcohol in relation to highway safety programs. The Arizona alcohol program received a major boost when in 1970 it received an NHTSA-funded ASAP for the City of Phoenix.

In 1972, Arizona enacted a law establishing 0.10 percent blood alcohol concentration (BAC) as the presumptive evidence for driving under the influence of alcohol.

The DWI enforcement effort is based primarily on the use of breath-testing equipment. Two days (16 hours) training is given to police officers on the effective use of breath-test devices. In 1970, there were 60 breath-test devices with 1,189 certified device operators; in 1976, there were 76 such devices with 3,540 operators. As a result of the increase in BAC testing capabilities and the Phoenix ASAP, DWI arrests have increased from 6,696 in 1971 to 28,000 in 1976.

In order to further improve DWI enforcement, all police traffic officers in 1978 will be trained in the detection and apprehension of drinking drivers and in the testimony of such cases. This will be obtained either as part of their basic training or special in-house training. Also, breath-testing equipment will be available to every police agency on a 24 hour-a-day basis.

Arizona's Highway Safety Plan for FY 78 calls for having an instructor team from the Northwestern University Traffic Institute conduct a 2-week course in DWI Law Enforcement. This course will be held in Phoenix for 30 potential DWI law enforcement instructors from 20 police agencies throughout the State.

These instructors conduct similar courses in their home areas. Approximately 150 traffic officers representing State, county, and other local law enforcement agencies have received training by these instructors. This program is a continuing one, providing for an in-service and recruit function.

Courts and adjudication agencies are required to conduct a PSI on each person convicted of driving under the influence of alcohol or another drug. The purpose of the PSI is to determine the existence and extent of a drinking or other drug problem.

The State provides for driver improvement programs for identified problem-drinker drivers, including a provision for referral to alcohol rehabilitation facilities established and maintained by the State or its political subdivisions. About 130 agencies, called "Alcohol Service Providers in Arizona," are available for use in referring problem-drinker drivers for help.

Most referrals for problem-drinker drivers are made in the City of Phoenix and in Pima County. Elsewhere, alcohol service providing facilities are used on a voluntary basis. Although there are 14 counties that have an alcoholism coordinator, this coordinator becomes involved with problem drinkers and alcoholics primarily through channels other than convictions for drunk driving.

The Mesa School District (outside of Phoenix) has had a pilot traffic safety education program supported by Federal highway safety funds. Recently completed, this project is reported as quite successful. Alcohol and drug abuse are included in this program at appropriate grade levels. It is anticipated that this pilot project will identify foundation curriculum material for use in schools throughout Arizona.

Traffic Representatives of Arizona's Governor's Youth Council present information and demonstration programs to elementary and high school students on traffic safety including the use of alcohol and driving. On several occasions, the youth at their annual meetings (usually held in October for 300-400 high school students) have witnessed a "drink-in" where the effects of alcohol on volunteers (not high school students) have been demonstrated.

Included in the OHS' Public Information activities is the use of radio and TV spots on alcohol safety. OHS uses public information material of the National Safety Council, American Association of Motor Vehicle Administrators, the Insurance Institute for Highway Safety, and NHTSA.

The Phoenix ASAP activities in the public information area have included telephone and household surveys to determine the extent of knowledge about alcohol as a substance, as well as about its deleterious effects on drivers and pedestrians.

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# ARKANSAS

The impetus for the development of an alcohol driver control program in Arkansas began with the ASAP in Pulaski County (1971-1974). To complement the ASAP effort, the legislature between 1970 and 1976 passed legislation that enacted or upgraded provisions for Implied Consent, BAC chemical testing, training/certification of BAC test operators, conviction penalties, and conviction reporting.

The program was aided in 1972 with the establishment of the Office of Alcohol Abuse and Alcoholism in the Department of Social and Rehabilitation Services. This Office undertook a broad-scope approach to the problems of alcohol and alcoholism.

In 1975, with the enactment of Act 931, traffic court judges had the authority to refer persons convicted of DWI to an authorized DWI educational-rehabilitation program for diagnosis and rehabilitation. This act established an assessment of \$25.00 upon each DWI conviction, to be dedicated to a fund for providing education and rehabilitation services to persons convicted of DWI. The act placed the custody of the fund and the design and establishment of the services with the Coordinator of Public Safety.

Through contracts with 15 Regional Health Centers, educational and rehabilitation services are available throughout the State. In 1976, \$400,000 in highway safety funds and \$350,000 in client fees supported these services. In FY 1977, \$600,000 of client fees are expected to provide support for the services.

Act 829 of 1977 amended Act 931 to remove the referral function from the Courts and place it with the Office of Driver Services, Department of Finance and Administration. This amendment places the authority for granting restricted driving privileges with Driver License Hearing Offices.

Twenty-four special State Police patrol units have been assigned to specific counties. Eighteen cities have established such units within their local police. Selection of the locations for these units was based on analysis of fatal and injury motor vehicle traffic accidents. Critical

crash periods (time of day, day of week) have been identified to focus law enforcement work shifts on needed coverage. Emphasis was placed on alcohol and speed enforcement. A 2-week Supervisory Officer training program is offered at Arkansas State University to emphasize selective enforcement training for State and local personnel.

In 1970, chemical tests were administered only in the large cities and more populous counties—probably less than 10 locations. Today, chemical test services are provided in about 70 of the State's 76 counties, with the goal to provide them throughout the whole State. During 1976, the number of persons tested reached 26,000.

Regional alcohol seminars are held annually for the exchange of information and experiences between judicial, enforcement, and rehabilitation personnel. From such seminars methods to expand and improve the program have evolved.

The Courts and the Office of Driver Services have developed a mutually beneficial information exchange. The Office of Driver Services provides the driving record to any traffic court upon request. The Courts provide an abstract of particulars for each person convicted of DWI. The driving record is used by court workers as a part of the PSI for alcohol dependency. The Court abstract is the basis for updating each person's driving record.

The Statewide program for alcohol safety rehabilitation developed in response to the provisions of Act 931 (1975) incorporated the PSI of the convicted driver's alcohol dependency, the provision of a range of rehabilitation techniques, and the opportunity for selective restoration of drivers' licenses. The PSI incorporates findings from the individual's driving history, the BAC at time of arrest, screening test score, and a personal interview. From these criteria, the individual's rehabilitation is selected. In 1977, nearly 9,500 persons were directed to the various rehabilitation centers. An estimated 8,375 persons completed their program. About 1/3 of the persons considered showed characteristics of being problem drinkers.

# CALIFORNIA

The Office of Alcoholism (OA) of the Health and Welfare Agency has the responsibility for the administration of all State and Federal alcoholism funds in the State. It provides statewide leadership, policy direction, and administrative services necessary for program objectives. Specific administrative functions include fiscal management, public information, program planning and review, management information, program evaluation, and technical assistance. The OA coordinates its activities regarding the drunk driver with the Office of Traffic Safety (OTS), headed by the Governor's Representative for Highway Safety, and with other State agencies as needed.

Counties are encouraged to determine priorities for alcoholism programs and are granted the responsibility for administration and management of all county alcoholism programs receiving funds through the OA. In addition, the counties are accountable to the State for effective implementation of these alcoholism programs.

With the help of Federal highway safety funds in Fiscal Year 1973, satellite and regional alcohol laboratories were established throughout the State. These laboratories are equipped with chemical breath-testing equipment and have trained forensic alcohol supervisors and breath-test operators. To date, over 7,500 breath-test operators have been certified. Due to the strategic placement of the breath-testing instruments, they are readily available to law enforcement officers throughout the State.

Basic training at the California Highway Patrol Academy includes 48 hours of instruction in alcohol enforcement. There has been some use of video and tape recorders, and one State jurisdiction is now experimenting with a mobile van. Several cities such as San Diego, Stockton, Modesto, Baldwin Park, Vallejo, and Napa are using selective enforcement patrols directed towards alcohol accident-causing violations.

In 1975, the Vehicle Code was amended so that a court may use discretion in sentencing convicted drunk drivers. As an alternative to court or Department of Motor Vehicle license suspension, the convicted person may consent to participate in a program for the treatment of problem drinking or alcoholism. This alternative, however, does not preclude fine or jail terms.

The following table indicates drunk driving arrests for the years of 1971 through 1975 in California:

	1971	1972	1973	1974	1975
Total	196,738	225,556	227,703	275,454	259,952
Agency					
Highway Patrol	79,380	95,667	119,798	124,179	120,888
Other Agencies	117,358	129,889	107,905	151,275	139,064
Charges					
Felony Drunk					
Driving	3,286	3,586	3,751	3,471	3,621
Adult Misdemeanor DUI	192,012	220,279	222,028	268,246	252,118
Juvenile DUI	1,440	1,691	1,924	3,737	4,213

Basically, as a result of the NHTSA-funded Los Angeles ASAP, and the State-funded Orange County Alcohol Project, a number of alcohol seminars and workshops have been given for judges, prosecutors, and probation personnel. It is estimated that about 150 judges have attended DWI Judicial seminars, and approximately 100 judges have attended alcohol and drug abuse workshops.

For the past several years, the Office of Alcoholism has been working on a standardized PSI form for use on all DUI offenders.

The State's alcohol rehabilitation program is a composite of separate county programs which, in turn, use public and private alcoholism services. The program includes referral centers, detoxification units, recovery homes, hospitals, and various types of nonresidential facilities. In addition, special programs are underway for persons in private and public employment, for drunk driving offenders, and/or public inebriates. The use of disulfiram in the rehabilitation program is limited, and is used primarily as a "holding action" to get a person into a clinic/outpatient program.

Instruction upon the nature of alcohol and other dangerous substances, and their effects upon the human system, is required by State law to be included in the curriculum of all elementary and secondary schools. The median time spent on alcohol education is 5 classroom hours.

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## CALIFORNIA

Persons seeking a teaching credential are required to take instruction about the use of alcohol as part of a health education unit requirement. This requirement may be fulfilled by taking a separate one-semester course on the subject or as part of another semester course of a related course of study. Such courses must be taken at an accredited community college or university.

The OTS has the responsibility for coordination of traffic safety/alcohol public information campaigns. For this purpose, the OTS has a full-time public information officer on its staff. Periodic news releases are issued by OTS emphasizing alcohol, and issues of the newsletter, "California Traffic Safety Coordinator" include reference to drinking and driving.

In addition to the routine drinking/driving information programs, a series of special emphasis campaigns has been conducted, keyed to special enforcement periods (usually on holiday weekends, or the Thanksgiving to New Year's period). For the 1976 holiday season, the theme was "Drink, Drive and Pay," and featured billboards, public service announcements (radio and TV spots) Statewide, and news releases. A similar emphasis campaign was implemented in late 1977, coinciding with a stepped-up enforcement effort by the California Highway Patrol.

NHTSA and other national public information materials are widely distributed over the State by their sponsors. Rather than duplicate this effort, OTS supplements these distributions with its own material.

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# COLORADO

The Governor's Representative for Highway Safety, Division of Highway Safety, has a full time staff member as the Director, Alcohol Driving Countermeasures (ADC) Program. The Director, Alcohol Driving Countermeasures Program, coordinates and assists in planning with other State agencies for alcohol/traffic safety.

All rehabilitation and treatment programs are sponsored and/or certified by the State Department of Health. The Governor's Alcohol and Drug Abuse Advisory Council, a function of the Department of Health, has as a member of the Council the Governor's Representative for Highway Safety. The Director, ADC Program, acts as the alternate for the Governor's Representative for Highway Safety. The Department of Health provides funds for all rehabilitation and treatment programs. NIAAA and NIDA also provide some funds to the Department.

The Division of Highway Safety sponsors a Governor's Highway Traffic Safety Advisory Committee comprised of prominent citizens concerned with highway safety including alcohol countermeasures.

The Governor's Representative is responsible for alcohol safety public information and provides approximately \$30,000 annually for the production and distribution of media and print materials.

In 1975 and subsequent years, the Division of Highway Safety used highway safety funds for support of the ADC program. In 1977, the State General Assembly appropriated approximately \$250,000 of general fund money to continue the federally-funded ASAP and to expand the alcohol traffic safety countermeasures activities Statewide. Excise taxes on alcohol beverages have financed alcohol safety activities.

The Director, Alcohol Driving Countermeasures, has two full-time employees whose functions include contacting local government agencies for ADC participation, providing technical training for enforcement and rehabilitation alcohol counselors and therapists, and visiting local alcohol safety projects after program initiation.

The availability of driver history data has existed in the State for quite some time. In the last 5 years there has been an improvement in the accuracy of the data being recorded.

The current driver license manual was issued in 1975 and contains information on the consumption of alcohol and driving.

During the initial stages of the NHTSA-funded Denver Alcohol Safety Action Project (DASAP), breath-testing instruments, video equipment, and police vehicles were purchased. This equipment was provided to municipal departments in the DASAP area as well as to the Colorado State Patrol. During the period of 1970 to 1976, 55 breath-testing instruments, 33 video and recording devices and three police vehicles were purchased for use in DUI countermeasure programs. Based on experience, procurement of additional video equipment is now discouraged since it has been proven to be of questionable value in court adjudication of DUI offenses.

The ADC program staff have endeavored to secure the establishment of a central DUI testing facility in each community for use by all law enforcement agencies. Such facilities are usually located in the Sheriff's office and have helped reduce enforcement processing time.

At the present time, a very extensive training program for the detection, apprehension, and processing of DUI offenders is in effect. Since mid-1976, approximately 1,200 law enforcement officers from 75 enforcement agencies have attended courses conducted by the ADC staff. This program not only improves the skill of the officers but also provides standardization of this type of activity throughout the State. The training has increased the number of arrests by the law enforcement officers in the departments using the specialized training.

At the present time, Denver has the only DUI enforcement patrol active and funded by the ADC program in the State. Law enforcement officers concentrate their DUI operations during the hours between 8:00 p.m. and 4:00 a.m. when DUIs are most prevalent on the highways. For several years, the Division of Highway Safety funded the Denver Police Department "DRYVE" Program, which involved overtime pay for several police officers during weekends and weekdays when DUI's were likely to be active. This program has been picked up by the City and County of Denver and funded by them beginning in FY 1977.

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## COLORADO

The DASAP, initiated in 1970, produced a number of changes in the adjudication disposition system. It generated better communication between the judges and the probation department. Forms were developed by ASAP that assisted in flow of case information between these two agencies. The accuracy of the driver history records has improved and, in addition, a more timely updating of these records has occurred. Treatment agencies have also improved their records service and now produce more accurate and definitive reports for use by the courts. Additionally, each treatment agency has access to driver history information for use in client problem diagnosis.

Alcohol-related traffic offenses are processed through the county court system. These courts are under the jurisdiction of the State Judicial Department. A judicial administrator in the Judicial Department is funded by the Division of Highway Safety and coordinates county court system activities and the Alcohol Driving Counter-measure Programs.

From the approximately 10,000 annual DUI arrests in the ADC area of operation, about 8,500 convictions result. Approximately 4,000 of those convicted are given PSI's. Of this number, about 2,800 are referred to rehabilitation.

There are approximately 120 rehabilitation agencies cooperating with the ADC program throughout the

State. The majority of these agencies receive Federal, State, and private funding assistance.

The ADC has published a manual for use in classifying DUI offenders. This document is regarded by many professionals in the field as being one of the finest instruments developed. The ADC has developed an alcohol educational curriculum guide which has been disseminated to all people conducting alcohol safety schools. In addition, the ADC Office has published an alcohol education treatment referral manual that covers approximately 120 programs in the State.

Legislation was passed providing an opportunity for a multiple DUI offender whose license has been revoked to have a hearing with the State Motor Vehicle Hearing Section if the individual has completed a treatment program that has been approved by the Division of Highway Safety.

Public information campaigns, involving local law enforcement agencies, the Colorado State Patrol, regional governmental units, local alcohol treatment programs, independent alcohol councils, and the Colorado Safety Association, have been undertaken.

Since 1973, the State has expanded comprehensive alcohol safety programs to approximately 68 percent of the population; an additional 14 percent reside in areas with partial alcohol safety programs.

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# CONNECTICUT

The Governor's Highway Safety Representative, serving under the Commissioner of Transportation, plans the use of Federal Highway Safety Funds for alcohol countermeasures. The Governor's Representative coordinates his activities with the Executive Director of the State Alcohol Council whose members and executive director are also appointed by the Governor. The Commissioner of Motor Vehicles, one of the appointed members of the Council, is the chairman of a special Council subcommittee which deals with alcohol and highway safety. This subcommittee serves as a coordinating agency for other State agencies and local governments on alcohol use and traffic safety matters.

Also active on the alcohol and drug problem with the Department of Motor Vehicles and the State Alcohol Council is the Department of Corrections.

In 1971, the DWI law was amended to reduce the permitted BAC from 0.15 percent to 0.10 percent. The State Health Department has developed standard procedures for the collection of evidentiary breath samples and provided instructions to each police department in the State. In addition, the State Health Department operates the gas chromatographs that determine the BAC's on the samples collected by law enforcement officers.

Approximately 10 hours of DWI law enforcement are included in the Basic Training Course for local enforcement officers. State enforcement officers receive 15 hours of alcohol training, including methods for the collection of breath samples. In addition, there is a special course in DWI enforcement which 30 law enforcement officers have completed. In 1976, on selected weekends, special alcohol patrols were operated by the State Police.

When a driver is convicted of DWI, a record of the disposition of the case is sent by the Court to the

Department of Motor Vehicles. This record provides the legal basis for the Department to invoke the statutory suspensions of 1 year for first DWI conviction or 5 years suspension for second conviction.

Since 1971, the Department has conducted a special Driver Improvement Course for persons convicted the first time for DWI. Following notification of the license suspension action, the Department invites the person to attend the course and rewards successful participants with a 50 percent reduction in the term of the suspension. In the last 4 years, about 5,000 persons have taken advantage of this offer.

Since Connecticut does not allow a fee system, these offender improvement courses have been financed with Highway Safety Funds.

A computerized record of each driver's history of accidents and convictions is maintained for administrative control of the State's driving population. Judicial use of these records has not been established.

In 1976, the Department of Motor Vehicles issued a new Drivers Manual which discusses the risks associated with driving after drinking. Additional public information materials are distributed by the State Police, the Safety Commission, many insurance companies, and the AAA.

In 1975, a Public Issues Forum was presented by the State Alcohol Council to focus attention on teenage drinking and on drinking and driving.

In 1973, the NHTSA "Alcohol and Highway Safety" guide for teachers was presented to elementary and secondary teachers throughout the State. Beginning in 1974, a 3-hour unit on Alcohol Safety was incorporated into the 30-hour driver education course in secondary schools.

# DELAWARE

Prior to the federally-funded ASAP, there were no organized highway safety alcohol programs in the State of Delaware. During the 1972-75 operational period, many countermeasures activities were initiated and some management/coordination of resources was accomplished. Since the ASAP program ended, all alcohol highway safety activities have been under the auspices of the Governor's Highway Safety Representative.

Before ASAP, the Driver Licensing Manual included little information concerning the risks of drinking and driving. Part of ASAP activities included updating the driver's manual and the testing documents. In 1976, the manual was revised. The laws of the State of Delaware and information concerning drinking and driving are now adequately covered in this manual.

The State shows the following record of driver license denials because of alcohol problems:

	1970	1971	1972	1973	1974	1975	1976
Denials	79	113	120	127	152	138	104

The State currently operates, with Federal Highway Safety Funds, a tactical alcohol enforcement program (TAC). Six officers are assigned as the Sussex County TAC Unit. The Unit is assigned to high incident areas, DWI enforcement, radar patrol, and related patrol activities. The TAC units write 29 percent of all traffic citations in the State.

The number of persons arrested for DWI for the years of 1970-76 are presented in the following table:

Agency	DWI Arrests Fiscal Year						
	1970	1971	1972	1973	1974	1975	1976
State Police	804	921	1036	1697	1597	1388	1227
All Others	N/A	N/A	1114	1433	1325	1371	1096
State Total	N/A	N/A	2150	3130	2922	2759	2323

All officers who operate breath-testing equipment receive 6 hours of training by the State chemist. The

training is conducted at the State Police Academy and is available to both State and local law enforcement officers. The State chemist is responsible for the calibration and maintenance of breath-testing equipment and testifying in court.

Two State Police Academy instructors were trained in special DWI detection techniques. These instructors now teach both State and municipal police recruits and also provide in-service training. The State Police receive 12 hours of training and the local officers 6 hours.

There were no major changes in the adjudicative disposition system from 1970 to 1976. In July 1976, the law was amended, allowing some latitude in adjudicative disposition. A convicted DWI person completing a course of instruction and/or a rehabilitation program can apply for reinstatement of his operator's license.

The PSI activity which started during ASAP is continuing. The information flow and exchange system also continues to function between the courts and other State agencies. The present investigation methodology uses BAC, prior record, and the Mortimer-Filkins Test.

Presentence investigators make requests for motor vehicle records from the respective police agency initiating the enforcement action. An online computer system is not available to the courts.

A nonmandatory rehabilitation program has been established under the direction of the State Alcoholism Services. Outside of the Alcoholism Services, there are no rehabilitation agencies formally participating in the State DWI program.

The State of Delaware driver education curriculum devotes 2 hours to alcohol safety education. Two police instructors visit each driver education class and provide demonstrations and information on alcohol and driving.

The State driver education division conducts an in-service training day each year for driver education teacher certification. Attendance is mandatory even though there are no alcohol-related courses required by the State for secondary school driver education teacher certification. This in-service training covers alcohol education.

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## DELAWARE

The Office of Highway Safety uses public information materials available from NHTSA and other national organizations and provides these to large corporations, State Departments, private organizations,

and others who may benefit. Recently the Governor's Representative's Office contracted with a private advertising agency to help produce public information materials.

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# DISTRICT OF COLUMBIA

In 1974, the District of Columbia began to make a positive effort to alleviate its drinking driver problem. In that year, an Alcohol Safety Coordinator was added to the staff of the Highway Safety Program Coordinator in the Department of Transportation. The Alcohol Safety Coordinator works directly under the District of Columbia Highway Safety Coordinator. The Highway Safety Coordinator reports to the Governor's Representative (Director of Department of Transportation). In late 1977, the Alcohol Safety Program became known as the "Alcohol Countermeasure Program" headed by the Alcohol Countermeasure Coordinator.

A 40-hour chemical breath-test operator training course was developed and a training program initiated by the District Police Academy to improve the detection and apprehension of DUI law offenders. The Office of the Chief Medical Examiner certifies breath-test equipment and all chemical breath-test operators.

In 1975, an Alcohol Enforcement Unit (AEU), comprised of specially-trained personnel, was formed using highway safety funds. This unit assigned policemen on an overtime basis at the times and the locations which have been identified as having a high concentration of alcohol related accidents. As a result of the special alcohol safety training and DUI enforcement unit assignments, DUI arrests have increased significantly. DUI arrests in 1977 were over 400 percent greater than 1974. The average BAC for DUI arrests in 1974 was 0.31 percent. In 1977, the average BAC decreased to 0.19 percent. In 1974, 57 percent of all fatalities were alcohol related. In 1977, alcohol-related fatalities decreased to 41 percent.

In Fall 1978, a seven-man alcohol/speed enforcement unit, using a mobile van, became operational.

A weakness in the Alcohol Safety Program at this point is the traffic court system. The courts do not process many cases. Most of the cases that go to court (D.C. Superior Court) result in jury trials which has created a serious backlog (6 months). Another problem is that many of these offenders are acquitted or plea to a lesser charge. Up to 1975, the conviction rate in D.C. was a disappointing 35 percent. The court backlog was resolved in 1975, and DUI conviction rate increased to 75 percent. However, jury trial convictions remain low. DUI conviction continues as one of the prime objectives

in the program. With DUI arrests at an all-time high and with a significant increase in persons submitting to a chemical alcohol test (80 percent), the backlog of jury trials was at one time overwhelming. The Office of Corporation Counsel has added 3 Assistant Corporation Counsels and further staff increases are expected.

In February 1979, an alcohol diversion program (rehabilitation) will be made available to first-time DUI offenders. The Office of Corporation Counsel will administer the new program, which will assist in alleviating the backlog and will also provide alcohol education and rehabilitation for those arrested for drunk driving.

Persons arrested for DUI, with a BAC below 0.15 percent and without prior DUI conviction are eligible to voluntarily enter this program in lieu of a DUI conviction (first-time offenders). Those who do not qualify for the Diversion Program (BAC above .20 percent, recidivist, etc.) or do not wish to enter the diversion program will be prosecuted in Superior Court for their DUI offense. Judges of D.C. Superior Court hearing DUI cases and passing sentence to those convicted of DUI in the District of Columbia will have the option to refer those persons convicted to the DUI diversion program as part of their sentences. All Diversion/Rehabilitation is on a client-fee cost basis, with no Federal or local funds necessary.

At present, D.C. has an implied consent law. If a breath test is refused by the DUI suspect, his license may be suspended for 6 months. The Bureau of Motor Vehicles (BMVS) hearing officer is responsible for reviewing the driving records of the arrested DUI. If the driver has a previous DUI record, the hearing officer may call the individual in and administer the Mortimer-Filkens test. The information gathered from this test will be used in an administrative license hearing. Based on the review of the driving record and/or the results of the breath test, the hearing officer has the authority to recommend the withholding of the driver's license prior to trial.

One area in which progress has been made toward increased convictions is that a DUI suspect's refusal to take a test can now be introduced as evidence.

Legislative proposals for FY 78 include a BAC 0.10 percent Illegal Per Se Law to replace the existing prima

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## DISTRICT OF COLUMBIA

facie law. Also proposed are elimination of urine tests, nonmandatory suspension of licenses (1 year) of first offenders found guilty, and a 1-year suspension of the driver's license for refusal to submit to a chemical test for alcohol (Implied Consent).

The BMVS hearing officer also has the authority to make referrals of arrested DUI's to rehabilitation, either prior to or following a court conviction. Options for referrals are listed as follows:

- Department of Human Resources (DHR) — four mental health clinics that furnish group therapy.
- Rehabilitation Center for Alcohol — inpatient treatment.
- Washington Counsel Center — Alcohol and Drug Counseling Service furnishing treatment.

Each of these rehabilitation centers provides feedback on the client's progress on attendance and recommendations for license reinstatement to the BMVS hearing officer.

The public information program has primarily been limited to use of press releases by the Metro Police Department through the normal channels of television, radio, and newspaper. In 1974, the first Alcohol Safety Curriculum Workshop for D.C. teachers and resource personnel was initiated. Recently, the Alcohol Coordinator has begun to seek the services of an outside contractor, "DISCUS" (Distilled Spirits Council of the U.S.), for the development of public information materials. In December 1977 a "Know Your Limits" campaign was implemented, the objective of which was to educate D.C. residents regarding amounts of alcohol consumed and BAC. It is anticipated that such education will have a positive effect on the attitudes of jurors sitting in DUI cases by increasing their understanding of BAC in relation to drinks consumed.

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# FLORIDA

The Governor's Highway Safety Commission exercises influence over the alcohol highway safety program. This influence involves program coordination among member agencies, mutual support for legislation, and broad-based action to implement the resulting statutory enactments.

The DWI enforcement effort is supported by the use of readily available breath-testing equipment. At the present time, 712 breath-testing instruments are available to 3,753 technicians in 298 law enforcement agencies.

To further improve the DWI enforcement effort, the Florida Police Standards and Training Commission requires that all police officers receive 2 hours of alcohol-related training. At each of its 15 regional training sites, the Commission uses the Michigan State University's 40-hour DWI training course. As a result of this effort, breath tests have increased from 19,000 in 1972 to 75,000 in 1976.

Prior to 1975, some courts would withhold adjudication in order to allow a person to enter a DWI school and to avoid harsh penalties such as the loss of the driving privilege. In 1975, an omnibus alcohol safety law took effect. This new law provided for:

- Pre-arrest breath testing
- An Illegal Per Se Law @ BAC of 0.10 percent
- Repeal of a law which permitted judges to sentence defendants while withholding adjudication.

The legal framework was further enhanced in 1976 when the State legislature passed a bill which makes it mandatory that a person convicted of a DWI offense enroll and complete an approved DWI school for

driver's license reinstatement. The coordination and authority for the schools is vested in the Florida Supreme Court which administers them through the Court's Traffic Court Rules. A full-time coordinator for these schools was initially financed by highway safety funds.

The major part of the rehabilitation effort is the DWI school program. In 1971, there were only two alcohol safety schools. Now there are 46. By the end of 1976, a total of 145,054 drivers had completed the DWI school course. During 1976, approximately 30,000 persons convicted of DWI have attended a 12-hour DWI school. Beyond these schools, there are comprehensive rehabilitation programs for social drinkers and multiple-DWI offenders in Jacksonville and Tampa.

In 1973, a special joint project was initiated by the Departments of Education and Health and Rehabilitative Services to determine what Florida's public schools were doing in alcohol education. The purpose of the project was to determine past achievements and to find out what resources are available for alcohol education. From this project a cooperative agreement was reached for more effective coordination, monitoring, and utilization of alcohol education materials. New materials were developed and tested and are now available for use in the schools.

In the public information area, the Highway Safety Commission's "Arrive Alive" program has been the major voice for highway safety in the State. Portions of this program have been devoted to discouraging the use of alcohol while driving. In FY 1978, \$138,138 of the State's highway safety funds were programed for "Arrive Alive" effort with a major thrust of this effort directed towards drinking and driving.

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# GEORGIA

The State's alcohol safety program activity was accelerated in 1972 when the Alcohol Selective Enforcement Task Force Unit of the State Patrol was established by a highway safety project and the City of Columbus started a federally-funded ASAP. Experience gained from these separate projects led to the coordinating role currently taken by the Georgia Office of Highway Safety.

Starting in January 1977, four State agencies (Georgia Safety Council, Georgia Office of Highway Safety, Judicial Council, and the Department of Human Resources—Alcohol and Drug Section) involved in alcohol safety programs began holding monthly inter-agency meetings for the purpose of coordinating their efforts in alcohol countermeasures.

The Georgia Driver's Manual discusses the effect of alcohol on the body and how it relates to the operation of a motor vehicle. Additionally, the State's implied consent law is explained along with a person's rights and the consequences of refusing to submit to a chemical test for BAC. Questions concerning alcohol and driving are included in the written examination for a driver's license.

Subsequent to the enactment of the implied consent law in 1968, a major goal of the Alcohol Implied Consent Testing Program was to place at least one chemical breath tester (Intoximeter), with trained personnel, in each county. This has been accomplished in every county but one and provides coverage within 30 minutes' travel from any point of arrest. The State is upgrading law enforcement equipment to meet standards established in 1977 by the Department of Public Safety.

In an effort to reduce the Officer's time involved with DUI arrests, the Georgia Office of Highway Safety has purchased five mobile blood-alcohol testing units. These units bring the testing equipment to the arresting officer. They are also used to transport the violator to a detention facility when warranted.

Approximately 1,200 local and State police officers received DUI law enforcement in-service training during FY 1976. This training was the 40-hour DUI Law Enforcement Training Course developed by the Highway Traffic Safety Center of the Michigan State University and the NHTSA.

One of the most successful alcohol countermeasure programs in Georgia has been the Alcohol Selective Enforcement Task Force Unit of the Georgia State Patrol. The 18-man Task Force concentrates DUI enforcement in areas which have a high concentration of drunken drivers and alcohol-related accidents. The Task Force averages about 1,100 DUI arrests per year.

For a first conviction of DUI, a driver has his license suspended for 1 year. For a second DUI conviction within 10 years of any previous conviction, the period of license suspension is 3 years. For a third conviction within 10 years, a driver's license is revoked.

The courts may, at their discretion, request a person's driving record to be used in a PSI. With the exception of habitual offenders, a judge may require a defendant to attend and satisfactorily complete a driver improvement course. The course to which a defendant is referred must meet standards approved by the court. The schools are provided principally by the Georgia Safety Council. In some cases, individual courts establish schools on their own initiatives.

During FY 1976 and FY 1977, eight DUI seminars for judges who try traffic cases were held, with approximately 100 judges attending. The agenda included the role of the traffic court judge, mock trials to teach/review the elements in a DUI offense, evidentiary problems, alcohol awareness, and information about DUI schools.

The basic rehabilitation program for the convicted DUI is the DUI school. A law passed in the 1974 General Assembly enables judges to sentence convicted DUI violators to attend a driver training school in addition to payment of whatever fine the judge deems appropriate. Ninety-five percent of the persons referred complete the school. At the 20 DUI schools, the clientele has consisted of about 70 percent nonproblem drinkers.

The Community Mental Health Centers are administered by the Department of Human Resources. The Alcohol and Drug Program of the Centers provide counseling and therapy on a fee basis. Attendance at such centers is voluntary.

The Alcohol and Drug Section of the Department of Human Resources is screening, on an experimental basis, persons who attend one of the DUI schools sponsored by the Georgia Safety Council. The purpose of the

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## GEORGIA

experiment is to determine if those persons being referred need additional help.

The State driver education curriculum recommends at least 30 hours of classroom instruction. Approximately 1 to 2 hours of the 30 are spent on the effect that alcohol and drugs have on a person's ability to operate a motor vehicle. Elementary and middle schools provide some alcohol education in disciplines such as health and science.

The Department of Public Safety, through its public information officer, releases information to all the news media concerning the department's programs in alcohol highway safety. The Department produces a variety of public information and educational materials which are disseminated through newspapers, radio, television, and "flyers." The information is especially prevalent around holidays or whenever a special enforcement campaign is being conducted. The Georgia Safety Council uses the newspapers on a limited basis to let the public know about their DUI schools.

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# HAWAII

The single State agency which coordinates all alcohol activities is the Alcohol Drug Abuse Branch (ADAB) of the Department of Health. The ADAB acts as liaison between the Federal Government and the State as well as between the State and its local jurisdictions. As part of this coordination effort, the ADAB works with the State Motor Vehicle Safety Office, which is the spearhead of DWI countermeasure programs.

Since 1967, Hawaii has enacted several laws concerned with controlling the drinking driver problem. The more important ones are related to implied consent and BAC testing. The 0.10 percent presumptive BAC for drunk driving was established in 1971.

Thirty-seven breath-testing devices are now available for police use, and training has been given to selected police personnel in the operation and maintenance of these devices. In addition, Maui County has recently purchased and implemented a program using 10 ALERT preliminary breath-testing devices.

In 1973, a team of experienced DWI patrol personnel from the Reno, Nevada Police Department visited Hawaii to train police officers in each county in the techniques for detecting and apprehending drunk drivers. Along with this training, the county police departments set up plans and schedules for deploying special DWI patrols at the times and place of high violation probability.

These patrols showed early promise of significant results in terms of reducing alcohol-related crashes. For example, Maui County reduced its alcohol-related fatality count from 14 in 1973 to zero in 1974. Subsequent analysis of statewide data revealed a slight decrease in the percentage of alcohol-involved fatal accidents. The 5-year average percentage for the 1973-77 period was 51.8. The 1973 percentage was 53.8 while that of 1977 was 46.8.

Hawaii law permits some judicial discretion in DWI cases, with alternatives including prison, fine, education, and volunteer work in the community. However, judges, as a rule, use only two of these discretionary choices in DWI cases—fine and education.

In 1974, seven judges attended a special DWI course offered by the National College of the State Judiciary.

Subsequently other judges, prosecutors, driver education counselors, and other judiciary personnel have attended similar courses which are generally sponsored by the Northwestern University Traffic Institute.

First-time DWI offenders with BAC's of less than 0.18 percent are generally referred to the court's Driver Education Program. This program requires adults to attend a 2-1/2 hour session each week for 5 weeks. In addition to emphasis on traffic safety and safe driving techniques, the curriculum provides information about alcohol and some of the legal ramifications of drunk driving offenses.

First-time DWI defendants with BACs of 0.18 percent or greater, along with second- and third-timers, may be referred to the supervisor of Court Counseling Services. There, depending on the wishes of the court, a psychological or psychiatric examination may be given to help evaluate the seriousness of the defendant's alcohol problem.

Driver history records are available for almost all DWI cases and are used quite extensively by the courts. Most people with alcohol problems are referred to the Salvation Army Alcohol Treatment Facility. The Salvation Army facility has an assortment of programs ranging from a detoxification unit to an extended care program.

Another commonly-used facility is the Kalihi-Palama Alcoholism Treatment Center where services include a complete range of individual and group therapy counseling.

In 1977, the State Judiciary's Division of Driver Education sponsored a 3-day DWI counterattack symposium, including instructor development and counselor workshops. Also in 1977, the University of Hawaii held a workshop on alcohol for driver education teachers. Thirty teachers attended this first alcohol workshop. Efforts are now being made to make the workshop a part of the regular university curriculum for driver education teacher certification.

Public information activities in Hawaii relating to drunk driving have included repeated showings of TV

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## HAWAII

spots by the four leading TV stations. One station estimated that it makes about 300 exposures per year, with heavy use during the major holiday periods.

The Hawaii Alcoholism Committee occasionally arranges public information interviews with police representatives, alcohol-treatment personnel, and/or alcoholics for discussions of problems involving alco-

hol, alcoholism, and driving while under the influence of alcohol. These interviews take place on various talk or host shows, on both radio and TV.

Newspaper articles regarding alcohol and traffic safety appear from time to time in Hawaii's leading newspapers. Some articles are syndicated; others are locally written.

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# IDAHO

The base of the Idaho alcohol driving countermeasures program was the NHTSA-sponsored ASAP. This Project was Statewide in nature and thus was the foundation of the State's efforts to coordinate countermeasures designed to control drunk driving.

Coordination of the alcohol highway safety program is vested in the Idaho Traffic Safety Commission, whose executive officer is the Governor's Representative for Highway Safety. The Commission is a statutory body consisting of the heads of major traffic safety-related State agencies. The Governor's Representative coordinates and cooperates with the Department of Health and Welfare, the Idaho State Police, the Idaho Education Department, the Idaho alcohol testing laboratories, the Idaho Supreme Court, and the Idaho Department of Probation and Parole.

In the area of new legislation, there have been two outstanding achievements: (1) The implementation of a 0.08 percent BAC presumptive law, and (2) a 2 percent tax on the sale of alcoholic beverages. Revenue from this tax is earmarked for the continuation of major alcohol countermeasure activities.

To aid the enforcement effort, there has been a steady increase in the availability and use of alcohol breath-testing devices by the police. The State Police Academy now offers training in the use of breath-testing equipment. Also, there has been limited use of video tape recording equipment. The Idaho State Police are operating selective enforcement patrols for DWI enforcement. The number of DWI arrests by the State Police increased from 991 in 1970 to 2630 in 1976. All members of the State Police are provided the NHTSA-developed, 40-hour "Detection and Apprehension of the Drinking Driver" course. All members of local police agencies are being given the course on a continuing basis.

Idaho now has an automated driver history file which makes possible the retrieval of such data for use by the courts or other necessary parties.

The Idaho courts have full discretion in the types and extent of sentencing which may be given to a convicted DWI law offender. The court operates under Administrative Rule No. 37 on PSI, which sets forth specific procedures which must be followed in that particular activity. Twenty presentence investigators have received some form of training.

The Idaho Department of Health and Welfare is responsible for alcohol rehabilitation programs. Long term facilities for inpatient care are more likely to be operated by the State or by large local hospital organizations. Social-drinker DWI offenders are provided short term, county-operated, alcohol school programs. Thirty alcohol school instructors have received ongoing training.

As a result of ASAP, the Department of Law Enforcement, which administers the State driver licensing program, placed a significant amount of alcohol-related information in the Driver's Manual.

The State Education Department recommends that one unit on alcohol be given in the driver education curriculum. Driver education instructors receive some alcohol education in in-service training courses.

The Traffic Safety Commission and the State Department of Education share responsibility for public information and education programs on alcohol in relation to highway safety. There are no alcohol safety campaigns per se. There is, however, a continuing emphasis on alcohol in relation to highway safety. It is estimated that during the 1975-76 fiscal year, over 100,000 pieces of highway safety information were given to local agencies and citizens. During the same period of time, the staff of the Commission prepared eight radio tapes, two TV clips, and numerous news releases. These items were distributed to the appropriate news media.

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# ILLINOIS

Since 1973, the Illinois drinking driver program has centered around 10 alcohol countermeasure projects which are funded in whole or in part by the Illinois Division of Traffic Safety. These projects established court referral programs aimed at rehabilitating persons arrested for driving while intoxicated. These programs have used over \$1.5 million of highway safety funds.

The alcohol program is coordinated by the Governor's Representative for Highway Safety. As such, he serves as the catalyst for program development. To assist him, each project has a director and coordinator who help plan the alcohol program in relation to highway safety. The annual highway safety work program serves as a planning, programing, and evaluation document for the State's drinking driver program. Furthermore, local governments are encouraged by the Governor's Representative to take full advantage of the various State level management services. After careful study of the history of the DWI court referral programs in Illinois from the perspective of all demands for highway safety funds, the State of Illinois has decided to suspend funding for these programs after June 30, 1977.

In spite of the suspension of Section 402 Highway Safety Funds for this program, the Illinois Court Rehabilitation Referral Program has been continued in most counties with the use of local funds.

The Illinois Implied Consent Law requires that the breath-testing instrument automatically display the test results visually to the arrested person and provide an automatic printed test record. There are 514 instruments in operation by both State and local police agencies, and some 3,001 officers are currently certified to operate such devices.

A limited selective DWI enforcement program was undertaken. This effort was complemented in FY 1975 and FY 1976 by a specialized training program for local police officers in the detection and apprehension of alcohol-impaired drivers.

The courts are reporting convictions to the State Record System and have driver history files available to assist post-conviction sentencing. The greatest improvement involves rehabilitation feedback to the courts through the probation process.

In 1975, Illinois conducted a series of DWI seminars for judges, attorneys, and court personnel. These seminars were conducted by the Center for Continuing Legal Education of the Illinois Bar Association.

In the driver licensing agency, special alcohol training has been given Driver Improvement Officers of the State's Driver Licensing and Improvement Division. This training is aimed at improving the officers' ability to identify drivers with drinking problems.

The State is improving its driver licensing records and is developing a record retrieval system for use by local agencies.

In Driver Education, out of the 30 hours of classroom instruction, 3 to 5 hours are now devoted to alcohol-related highway safety subjects. About 95 percent of all 1976 high school graduates have completed driver education.

Referral in the majority of the rehabilitation programs is made through the State's Attorney's Office after a court appearance in which the case may be continued. The most common rehabilitation program provides alcohol safety education to the DWI offender about the effects of alcohol on the mind and body and the resulting effect on driving behavior. Since 1973, approximately 5,000 people have gone through various treatment programs at a cost of about \$300 per person.

Illinois has developed a Statewide public information and education program to reach the general public on the subject of alcohol abuse as it relates to highway safety. This is accomplished through the use of a Speaker's Bureau and spot announcements for radio and TV.

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# INDIANA

Until 1974, the State alcohol safety program consisted basically of equipment acquisition and police training in the use of such equipment. In July of 1974, the Division of Addiction Services, Department of Mental Health (DMH), was established as part of a State program which emphasizes the identification, referral, and rehabilitation of the drinking driver. This program, utilizing already-existing community agencies, established a total of 11 alcohol countermeasure sites covering approximately 30 percent of the State's population. All of these sites have been started with Section 402 Highway Safety Funds. Thus far, three of those sites have been picked up with local budgetary schedules, and others will follow. Additional alcohol safety sites are in a planning phase and will cover the majority of the population. The city of Indianapolis has had an operational ASAP from 1972-74.

The Director of Alcohol Countermeasures within the Division of Addiction Services, DMH, has the responsibility for starting local projects and for coordinating all activities from the State level. As such, he provides advice, guidance, and encouragement to enforcement agencies, the courts, rehabilitation centers, and other interested agencies or parties in the development and operation of countermeasure projects. Close coordination/cooperation has been established with the Traffic Safety Office (Governor's Representative for Highway Safety) which provides "seed money" in the formative years of a project's development.

To aid in the DUI control effort there are three Indiana laws of special importance. The first is the DUI-Evidence of Intoxication law, which provides that a BAC level of 0.05-0.10 percent is probable evidence of being under the influence and a BAC of 0.10 percent or more is prima facie evidence of DUI. The second law is the Implied Consent Law, which requires drivers to submit to a BAC chemical test upon probable cause of a DUI violation. The third is the judicial discretionary powers section of the Motor Vehicle Law, which allows a judge to supplement fine and/or imprisonment sentences with license supervision or probation for those DUI offenders that participate in a therapy program. Funding for court services prior to conviction is available from the local community budgets. Post-conviction services are basically self-supportive from the convicted offender.

All of the 21 districts of the Indiana State Police have concentrated on the apprehension of drinking drivers. All of the districts have been equipped with breath-testing equipment and have the appropriate number of certified operators. The strategic locations of the police districts and the availability of the breath-testing equipment is such that suspected drinking drivers can be tested within 1/2 hour of arrest. The Indiana State Police is currently expanding its surveillance, apprehension, and testing capabilities by using mobile vans and video and audio tape recorders. This program will also involve special training and use special patrols. The local police agencies have also enhanced their capabilities to apprehend drinking and driving violators through the increased use of the breath-testing equipment. To date, nearly 275 chemical breath-test units exist in the State.

Five to ten percent of the high school driver education curriculum consists of alcohol-related subject matter. The total curriculum includes 30 hours of classroom lectures and 6 hours of behind-the-wheel instruction. Approximately 75 percent of all eligible students complete the total program with 85 to 90 percent of them completing the classroom portion of the curriculum.

At the 11 alcohol countermeasure sites, some or all of the following rehabilitation services are offered: Mental Health Centers, Alcoholics Anonymous, Family Service Centers, Half-way Houses, Drug Abuse/Addictions Programs, Youth Service Bureaus, Detoxification Centers, Alcoholism Rehabilitation Centers, and various types of hospitals. In addition, alcohol safety education schools are available and are supported by a \$25 fee per DUI offender.

Rehabilitative services are made available to clients in three ways. A person who is diagnosed as a social drinker is referred to an alcohol education school. One who is diagnosed as a problem drinker is referred to the alcohol school and limited outpatient counselling. A client who is diagnosed as an alcoholic is referred to an alcohol school, an extended outpatient facility, and often Alcoholics Anonymous or other specific alcohol addiction programs.

Except for "hot" items made available through NHTSA or the news media, public alcohol education

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## INDIANA

and information activity is developed individually for local use. Various types of public media, such as radio,

newspapers, pamphlets, etc., have been used to accomplish this mission.

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# IOWA

The Administrator of the Governor's Highway Safety Office, the Director of the Iowa Commission on Alcoholism, and the Director of Highway Safety Action Programs in the Department of Public Safety (DPS) coordinate alcohol countermeasure programs in Iowa. The Administrator of the Governor's Highway Safety Program assesses the funding needs, the Director of Highway Safety (DPS) provides technical expertise in counter-alcohol activity, and the Director of the Commission on Alcoholism provides for the funneling of financial assistance and oversees rehabilitation programs. Highway safety programs are primarily conducted by the first two designees. Responsibility for the Public Information activity is shared by the Governor's Office for Highway Safety and the Departments of Public Safety and Transportation.

Some of the improvements made in the traffic safety laws to control drinking drivers include:

- (1) initiation of a Statewide breath-testing program (1969);
- (2) an act relating to chemical tests for determining intoxication amended to expand the number of law enforcement officers who could invoke the Implied Consent Law (1970);
- (3) legislation passed making BAC of 0.10 percent or more a basic fact which gives rise to a presumption that the driver was driving while intoxicated (1971);
- (4) legislation passed providing additional sentencing alternatives to judges for persons convicted of OMVUI (1972);
- (5) legislation passed establishing a course for drinking drivers in area community colleges and vocational schools (1972);
- (6) startup of the Sioux City-Woodbury County ASAP (1972);
- (7) the first of six local comprehensive ASAP's financed with highway safety funds became operational in Linn County (1975);
- (8) adoption of an administrative rule change providing for evidentiary, direct breath testing which was implemented in 10 major metropolitan sites (1975);
- (9) administrative rule providing for the procurement of 100 prearrest screening devices for use by State and local law enforcement officers to determine driver's BAC at roadside (1976);
- (10) purchase of 10 evidentiary breath-testing units and simulators for local centralized booking at new ASAP sites (1976);
- (11) addition of 20 new State law enforcement officers whose primary goal is the detection and apprehension of drinking drivers (1976);
- (12) revision of the criminal code (effective January 1, 1978) which restructures penalties for operation of motor vehicle while under the influence (OMVUI) (1977); and,
- (13) a point system to help insure that the more serious drinking drivers receive rehabilitation.

Substantial improvements have been made in the area of detection and apprehension of the drinking driver. This has occurred as a result of changes in legislation, specialized training of personnel involved in the alcohol traffic safety system, procurement of chemical testing equipment, and additional emphasis placed on the problem created by drinking drivers. Every qualified traffic enforcement officer in Iowa has been afforded training in OMVUI countermeasures. A significant portion of the Iowa Law Enforcement Academy training and Department of Public Safety recruit training is devoted to identification, apprehension, and prosecution of drinking driver offenders. Specialized training is provided to all officers in the application of the "Implied Consent to Test Law" prior to their certification to use direct breath-testing techniques. Direct breath-testing devices have been installed at the 10 metropolitan centers which were identified as critical areas of need for alcohol countermeasures. Training has been provided for operators of this equipment. The responsibility for certification of equipment and operators was assigned to the Bureau of Criminal Investigation. Prearrest alcohol-testing devices have been provided State and local officers to provide further substantiation for their suspicions when evaluating a subject suspected of OMVUI. The timesaving techniques adopted to minimize officer "down time" included the development and implementation of centralized booking procedures and facilities. Selective enforcement assignments are

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## IOWA

formulated from data that identify the location and peak time periods of alcohol-related personal injury and fatal traffic crashes. OMVUI arrests by the Iowa State Patrol have increased from 1,686 in 1969 to 2,873 in 1976.

Driver history data is available, upon request, to law enforcement agencies, courts, and rehabilitation services on a need-to-know basis.

The Iowa Drivers Guide has contained, since 1966, information relating to the risk of drinking and driving. The current updating will again reflect considerable alcohol-related material. All written driver license examinations contain questions pertaining to alcohol.

Improvements in diagnosing and referring OMVUI clients to rehabilitation can be traced to several factors: improved facilities and additional professional personnel in alcohol rehabilitation modalities; the incorporation of self-appraisal materials in the Drinking Driver

Courses; more sentencing options available to the courts.

The Iowa Commission on Alcoholism has developed a tracking system for all clients of community alcohol service centers. The OMVUI clients are identified numerically and by the sources and route of their admission rather than by group classification.

Public Information and Education (PI&E) activity is generated from the Department of Public Safety and Transportation and the Governor's Highway Safety Office. The first two agencies are represented by a professional PI&E director and a small staff; the Governor's Highway Safety Office generates its own information and releases. A wide variety of media approaches has been undertaken. One activity was a public billboard campaign carried out in cooperation with outdoor advertisers. Future plans include a more coordinated public awareness program directed at counter-alcohol activities, speed control, and vehicle occupant restraints.

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# KANSAS

Major developments in Kansas since 1969 include:

- (1) creation of a Governor's Advisory Board on Alcoholism (now the Alcohol Abuse Unit, State Department of Social and Rehabilitation Services) (1969);
- (2) establishment of a formalized procedure for certification of alcohol breath-testing devices and operators (1969);
- (3) development and implementation of the Wichita-Sedgwick County ASAP (1970);
- (4) revision of a State statute reducing the presumptive Blood Alcohol Concentration (BAC) level from 0.15 percent to 0.10 percent (1970);
- (5) establishment of a full-time position of Alcohol/Traffic Director in the Governor's Commission on Alcoholism (1972);
- (6) establishment of the Assistant State Court Administrator's office (1973);
- (7) submission and approval by the NHTSA of the State Alcohol/Traffic Safety Plan (this was the first State operational plan submitted in the United States) (1973);
- (8) passage of a State statute which allowed the Department of Health to formulate equipment and personnel requirements for alcohol-testing devices (1973);
- (9) implementation of the Topeka ASAP with highway safety funds that included a total systems approach including evaluation and based on the Wichita-Sedgwick County ASAP (1974);
- (10) implementation of the Johnson County Court Program for alcohol-related cases that was based solely on local initiative (1974);
- (11) implementation of full-time traffic instruction capability at the Kansas Law Enforcement Academy which increased the DWI training segment from 2 to 10 hours (1975);
- (12) funding of 21 local selective traffic enforcement projects (1975);
- (13) establishment by the Kansas Highway Patrol of DWI detection as a major goal for 1976 with patrol work schedule revised to provide full weekend coverage (1975);
- (14) enactment by the City of Wichita of an Ordinance providing for the collection of a special \$2.00 fee on all convictions (except parking tickets) to continue key countermeasures previously established under the federally-funded ASAP (1976);
- (15) passage of legislation for Court unification and providing centralized authority for the State Court Administrator (1976);
- (16) initial passage of State legislation appropriating funds for support of local alcohol/rehabilitation programs (1976);
- (17) Kansas Highway Patrol implementation of an education program on alcohol and driving safety directed at sophomore-level students (1976);
- (18) implementation of the DWI Detection Training Course, taught onsite for local enforcement officers (1976);
- (19) passage of legislation especially allowing judicial discretion pertaining to the assignment to rehabilitation programs for persons convicted of DWI (1977);
- (20) continuation of the federally-funded Wichita ASAP through local appropriations and client fees (1977); and,
- (21) implementation of five new mini-ASAPs, using highway safety funds, client fees, and local appropriations (1977).

Principal funding sources for alcohol programs are municipal, county, State and Federal monies and client fees. The portion of Federal Highway Safety Funds dedicated directly to alcohol programs has increased from 1 percent in FY 1973 to 21 percent in FY 1977. During this same period, highway safety funds directed to Police Traffic Services, Alcohol and Traffic Court Countermeasures have increased from 41 percent to 80 percent of the total obligational authority. Alcohol/traffic programs are normally initiated with partial Federal financing from highway safety funds with the majority of support being municipal or county. Client fees pay the major portion of costs for PSI and rehabilitation. Alcohol gallonage taxes collected from private clubs are used in alcohol rehabilitation. These funds are managed by the State Department of Social and Rehabilitation Services.

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## KANSAS

Organized alcohol/traffic safety programs now operational and directed at controlling the drinking driver cover more than one-half of the State's population. These include four comprehensive programs (Wichita-Sedgwick County, City of Topeka, Lawrence-Douglas County, and the City of Emporia) and sixteen partial programs. Comprehensive programs have a dedicated Program Coordinator and include a full range of countermeasures with reporting and evaluation requirements. Partial programs have a Program Coordinator who is assigned to a multicounty area. These programs have PSI capability, established alcohol/traffic safety schools, and evaluation and reporting requirements.

DWI violator detection and apprehension capabilities have been improved through specialized training and procurement of chemical test equipment. The role of the Kansas Highway Patrol (KHP) is one of establishing priority for alcohol/traffic impact for the patrolmen and providing breath-testing capability in districts and for rural enforcement agencies. In 1975, the KHP designed and implemented a DWI detection training course for all troopers with an annual refresher course required. Patrol strategies were modified based on district data indicating high areas of DWI arrests and alcohol-related traffic crashes. The Kansas Law Enforcement Academy in 1976 modified the curriculum for basic training of local officers. Also, March 1976 marked the implementation of a special 20-hour DWI Law Enforcement Course designed specifically for seasoned local officers.

Improvements in information flow between the courts and State agencies have been accomplished through the ready availability of driver histories to the courts and coordination between the State court, rehabilitation, education, and enforcement agencies. DWI convictions reported to the State Driver License Agency increased from 3,915 in 1970 to 6,544 in 1976. This increase occurred during a period when the judiciary had limited alternatives other than a reduction of charge.

There are 103 public and private agencies on record as having varying degrees of alcohol rehabilitation serv-

ices. These agencies are used primarily for counseling and treatment of alcoholics. However, they are also available to the local courts and are utilized in the support of organized alcohol/traffic safety programs.

Prior to 1970, there were no formalized alcohol/safety schools available to the courts in Kansas. Based on the experience of the ASAP's in Wichita-Sedgwick County and Topeka, a number of schools have been established. A DWI client tracking system is established and maintained by each of the highway safety funded alcohol/traffic programs. Parole/probation officers of the various courts statewide also maintain tracking systems.

The State Driver Education curriculum guidelines were modified to provide extended alcohol information dissemination in 1968 and again in 1975. In 1973, the State initiated an alcohol abuse curriculum guide to be taught in the fifth and ninth grade Science and Health classes. In 1975, the State implemented a "baseline curriculum package" which includes a unit on alcohol and requires 2 hours of instruction.

Driver history data is available from computerized files directly to local courts and enforcement agencies. This system was established in 1973 through highway safety fund support. The State Driver's License Manual was revised in 1975 and now contains a highlighted portion on alcohol and driving.

Since 1972, there has been an organized alcohol-driving public information and education program. The Alcohol/Traffic Coordinator is now responsible for this activity and provides consultation and materials to the local ASAP's and coordinates with the State Department of Education, Highway Safety, and Highway Patrol in the design and implementation of any statewide public information and education efforts in this area. Each highway safety funded alcohol/traffic project has a public information and education component and is responsible for utilizing State-produced or nationally-produced resources in addition to materials developed locally.

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# KENTUCKY

The enactment of the Implied Consent Law in 1968 established Kentucky's foundation for an alcohol safety program. Adding to this legislation, a systematic enforcement-judicial-rehabilitation model was established in Lexington, and the Alcohol Driver Education law was passed in 1974. These three events have provided the framework from which the State's current program has emerged.

The Implied Consent Law permitted the use of breath-testing in addition to already recognized blood-testing criteria. The Traffic Institute at Eastern Kentucky University (EKU) became responsible for the establishment and maintenance of Statewide alcohol breath-testing procedures. This required the development of performance standards for equipment; the purchase, distribution, and maintenance of the equipment; the training and certification of testing operators; and the maintenance of records necessary for program management. Law enforcement officers from the State and local police were trained to operate and care for the equipment. Equipment repair and replacement is provided by the EKU Traffic Institute.

Police personnel operating breath-test equipment was recognized in the courts. This recognition resulted in increased arrests and testing. Between 1970 and 1976, the State Police increased the number of arrests from 8,163 in 1970 to 17,943 in 1976.

Testing stations are located throughout Kentucky at 200 locations. The State Police and local departments have trained 1,700 certified operators.

With a testing program well established, the next step was an initiative by the Kentucky Highway Safety Program to identify and alleviate weaknesses in administering DWI cases following arrest. The Lexington Metro Police department was the sponsoring agency, assisted by the EKU Traffic Institute. The police deployed a special enforcement unit on Friday and Saturday nights between 11:00 p.m. and 3:00 a.m. to locations where alcohol-related violations and accidents had been recorded. The intensified enforcement was accompanied by a public information program on the risks and conse-

quences of drunk driving. Information was disseminated through the newspapers, radio, and television and also featured special materials made available to local secondary schools. The Court assisted the project through judicial support and the establishment of special administrative staff and procedures to process the anticipated additional DWI cases and the paperwork attendant to the presentence investigations.

The Lexington model project resulted in:

- Increases in the number of arrests by 50 percent
- Increased convictions by 200 percent
- Increased public knowledge
- Establishment of DWI school in lieu of license suspension

In 1974, the Kentucky General Assembly enacted a law establishing a program of Alcohol Education (AE) administered by the Kentucky Driver License Division and available to each court as a possible disposition for first-time DWI conviction. This law permits the retention of driver's license upon completion of an AE course. This penalty option has resulted in a reduction of amended charges and case dismissals and an increase in DWI convictions. Since the establishment of AE Schools, the number of persons completing the course has risen from 622 in 1974 to 5,382 in 1976. A feature of the schools is the inclusion of an alcohol-dependency screening test that provides a basis for an individual to determine the extent to which alcohol consumption has become problem-producing and indicates the need for professional rehabilitation assistance.

In the Driver Education program of the State's secondary schools, the curriculum recommends 3 to 4 classroom hours of alcohol and highway safety. This is in addition to coverage of alcohol issues in the elementary and secondary health education programs. Driver Education teachers are required for certification to complete 12 semester hours of special preparation, including 2 hours on alcohol-related subjects.

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# LOUISIANA

Several events that have occurred since 1970 can be considered as key milestones in the development of alcohol safety in Louisiana. These events that brought about the program are:

- The federally-funded New Orleans ASAP—operational 1972-76
- Development and startup of the Driver Improvement and Alcohol Rehabilitation Education Driver in 1973
- Initiation of the DUI Selective Enforcement Program in 1973
- Development in Lake Charles of an Alcohol Safety Education Program in conjunction with the Substance Abuse Clinic—started in 1973 with funding provided by the Automotive Safety Foundation
- Development and implementation of an Alcohol Traffic Safety Program in Baton Rouge which started in 1970 with a 3-year alcohol treatment grant from LEAA

Almost 70 percent of the population in Louisiana is covered by an alcohol safety program. Almost 19 percent (707,800 persons) of the State's population is exposed to a comprehensive alcohol safety system (New Orleans and Lafayette/Lafayette Parish). About 37 percent (1,404,323 persons) is covered by a partial system consisting of enforcement and alcohol safety education. About 15 percent (522,808 persons) has access to DUI schools only.

The primary role of the Louisiana Highway Safety Commission in development and coordination of Alcohol Highway Safety programs has been: to initiate a demonstration project in the parish and city of Lafayette to test countermeasures for implementation throughout the State; and to develop an extensive DUI selective enforcement program in seven urban areas and eleven rural areas.

The Louisiana Health and Human Resources Administration, Division of Hospitals, Bureau of Substance Abuse, is responsible for all Alcohol and Drug Abuse programs within the State of Louisiana. Alcohol Safety schools are administered by the Department of Education, Driver Training Division, or as a community project through the local court system. Attempts have been

made at the local level to establish either formal or informal working relationships with the courts.

In New Orleans, where an ASAP (funded by City and Federal funds) has been in operation for 7 years, and in Lafayette, where a highway safety funded mini-ASAP has been operational, a formal link exists between the Alcohol Traffic Safety Program and the State Alcohol Rehabilitation programs.

Louisiana's Implied Consent Law was passed in 1968. Recently, this law was amended to provide that all DUI cases be tried in courts of record under State law as opposed to City ordinance. This provides for making the conviction a part of the person's driving record, thus reducing the chance of classifying the individual as a first offender on a subsequent conviction.

The State DUI law has also been amended (1972) to give judges the authority to assign persons convicted of DUI to schools and/or rehabilitative treatment in addition to or in lieu of fines or jail sentences. Since its inception, 3,336 have completed the course. Annual enrollments have grown from 537 to 1,400.

A statewide DUI selective enforcement program in identified urban and rural areas has been in effect since 1974. This program has been enlarged in scope since that time, and the FY 1978 Highway Safety Plan lays out an approach for shifting this concept into an overall patrol management strategy for the communities involved and the State Police.

The Louisiana Highway Safety Commission has purchased 16 mobile vans (one for each of the 11 State Police Patrol Districts and five for major urban areas). They are used to expedite BAC testing of persons arrested for DUI offenses. Approximately 140 breath-testing devices have been purchased and distributed statewide. The State also has five crime labs equipped to do necessary blood analysis.

To insure proper analysis of the 140 test instruments, an alcohol test training program has been initiated within Louisiana. Approximately 700 to 800 operators have been trained to date.

Training in DUI detection and apprehension has been conducted by the Louisiana State Police Training Center and the Law Enforcement Training Academy at the

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## LOUISIANA

Louisiana State University. A booklet that discusses all aspects of DUI detection and apprehension has been developed through the Louisiana Highway Safety Commission and is being used in the State Police recruit and refresher training programs. In addition, it has been distributed statewide for use in local police training academies. These improvements in equipment, augmented by additional training in detection, have resulted in the number of DUI citations increasing from 9,096 in 1975 to nearly 12,000 in 1976.

The Louisiana Driver's Guide has contained information on the effects of alcohol on driving and on the Implied Consent Law since 1972. The question/answer format presents the information, adds a specific illustration, and offers a multiple-choice answer to a related question.

Driver history files are available to courts and other State agencies through online terminals. This has helped to improve the flow of information for use in diagnosing persons convicted of DUI.

Diagnostic and referral techniques for DUI's that were developed in the New Orleans ASAP have been the

basis for diagnostic and referral activities in other sites throughout the State.

The Louisiana Department of Education has recently completed a revision of the State's driver education curriculum. Under this new curriculum, a minimum of 4 hours out of a 30-hour program is to be spent on alcohol safety education. This new curriculum will be presented to all driver education teachers in the next series of mandatory annual teacher instruction workshops.

Training of Alcohol Safety School Instructors is an integral part of the Driver Improvement and Alcohol Rehabilitation Training Program. This training is another alcohol safety activity operated by the Department of Education.

The FY 1978 Highway Safety Plan proposed a public information program to be carried out through the Office of the Louisiana Highway Safety Commission. In the past, public information programs have been carried out in New Orleans and Lafayette as part of the ASAP's.

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# MAINE

Statewide alcohol safety coordination is a staff function of the Division of Alcohol and Drug Abuse, Maine Department of Health and Welfare (HEW). This coordination includes advisory participation on the Maine State Highway Safety Committee. The role of the Committee is significant because as a body of concerned citizens it provides a two-way channel of information between participating State agencies and both local government and local committees and leaders.

State agencies that are involved with HEW are the Division of Motor Vehicles, the State Police, the State Council on Alcoholism, and the Governor's Representative. The Highway Safety Bureau staff meets regularly with representatives of these agencies to ensure a continued alcohol safety program using the statutory and administrative responsibility of each agency.

In 1971, after the beginning of the NHTSA-contracted ASAP in southern Maine, State law was changed to lower the prima facie BAC evidence level to 0.10 percent. (Note: the original ASAP that operated in the two southernmost counties has been expanded statewide.) Testing methods were also changed from blood or urine analysis to blood or breath analysis. In 1973, the alcohol treatment or rehabilitation programs became mandatory for persons convicted of a second DWI offense who were on probation. In 1977, the legislature enacted a law requiring all DWI first offenders to attend a prescribed rehabilitation program.

The Implied Consent Law enacted in 1967 and amended biennially since enactment exceeds the requirements of Highway Safety Standard 308. Under this law:

- All individuals convicted of first offense, DWI, must complete Driver Rehabilitation Course prior to the restoration of their driver's license.
- Violation of the Implied Consent Law results in 90-day license suspension which may be reduced to 30 days on successful completion of the rehabilitation program.
- BAC testing procedures include blood and breath analysis performed by certified laboratories.
- Standardized procedures and curriculum are used in all the DWI Rehabilitation Centers in the State. The program is based on the national ASAP experience.

- Juvenile DWI offenders, in addition to completing the regular rehabilitation course, must contact a referral agency before restoration of their driver's license.

The rehabilitation training program is a responsibility of the Bureau of Rehabilitation/Maine Department of Human Resources, Office of Alcoholism and Drug Abuse. This responsibility is an outgrowth of the service provided in the 1971-73 ASAP project. Since the termination of the project, this function has coordinated closely with the Safety Bureau/Maine Department of Transportation (MDOT).

The Maine State Police provide courses in DWI detection and enforcement at the Criminal Justice Academy. More than 200 officers from both the State and local agencies attended these courses in 1976. All local police attend a 12-week course which includes a minimum of 11 hours in DWI procedures. State Police must attend a 16-week course which includes 40 hours of DWI procedures. An additional 1,200 State and local police officers will receive training in DWI enforcement. As a result of this training, DWI arrests have increased from 6,329 in 1973 to 8,300 in 1976.

The Office of Alcoholism and Drug Abuse of the Maine Department of Human Services, the Bureau of Rehabilitation, is responsible for the rehabilitation training program.

A series of seminars is conducted periodically at 10 district armories throughout the State by a team representing the State Motor Vehicle Division (DMV), the Maine HEW, the State Police, the Attorney General's Office, and the MDOT. Subjects covered are implied consent, review of pertinent DWI sections of the Motor Vehicle Law, breath-testing, DWI detection, and rehabilitation. All State and local police and selected court personnel are invited to attend.

Law enforcement officers have immediate access to driver license and registration data from computer terminals at four locations. These data assist in the identification and apprehension of hazardous drivers. A DWI arresting officer must provide the driver records to the court.

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## MAINE

The Office of Alcoholism and Drug Abuse of the Maine Department of Human Services, the Bureau of Rehabilitation, is responsible for the rehabilitation training program.

Individuals convicted of more than one DWI offense are required by DMV policy to consult an alcohol counselor. A favorable counselor's report is necessary before the offender will be considered for license restoration.

The DWI Rehabilitation Program refers persons in need of further rehabilitation or follow-up to AA, Community Clinics and, where appropriate, to private industry counseling programs.

Juveniles in the State of Maine convicted of DWI must complete the Driver Rehabilitation Course and

make contact with an appropriate agency before having their driving privilege restored.

The Driver Education Curriculum for both teachers and students includes 6 hours of alcohol control instruction.

Public Information materials on alcohol safety matters receive statewide distribution. Public service messages, developed by the Safety Bureau publicity representative, are distributed to the more than 50 radio stations and the 11 television stations serving the State of Maine. The radio stations are supplied with sets of professionally-produced taped messages as well as with scripts which are suitable for short live messages. In addition, there are personal visits by members of the MDOT staff, Maine Highway Safety Committee, and local safety committees.

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# MARYLAND

Maryland was the first State to pass a law which decriminalized alcoholism and recognized it as an illness. This law, which became effective July 1, 1968, provided for a statewide program that included efforts directed at traffic safety. As a result of this legislation, the Division of Alcoholism Control was created in the Department of Health and Mental Hygiene (later to become the Alcoholism Control Administration). In 1971, the Division made application for highway safety funds to use in an alcohol safety project. The ASAP was operational in Baltimore from December 1972 through June 1975.

The Department of Health and Mental Hygiene, Division of Alcoholism Control, was the grantee for 402 funding and the contractor for 403 funding. Through seed money from Federal highway safety funds, DWI schools have been established in all of the counties in Maryland as well as the City of Baltimore.

The Alcoholism Control Administration is generally considered to be the alcohol program coordinator funding most programs throughout the State. The Alcohol Control Administration also acts in a coordinating capacity for local DWI schools and the courts which play a vital role in local programs. The Governor's Highway Safety Representative supports these activities from the Federal highway safety funds allocated to the State. Highway safety funding has been used primarily to establish administrative positions at the State level, for training seminars and workshops for DWI instructors and court enforcement personnel, and in upgrading the alcohol chemical testing program and increasing enforcement of drinking driver laws.

The use of selective enforcement has increased substantially throughout the State since 1970 by both the State Police and local law enforcement agencies. Law Enforcement Training has become more detailed and sophisticated with regard to detecting the drinking driver. State police initiated Operation "Yellowjacket" in 1977, a project designed to reduce accidents and incidents of drinking and driving by concentrating efforts in known areas of accidents.

Since 1970, the State Police arrest rates for DWI have increased steadily from about 6,000 to 12,000 in 1974, at which a leveling off seems to have occurred. The use of chemical breath-test units has become standard through

the State. There are currently 90 units in operation with over 600 certified breath-test operators.

In Maryland anyone driving with a BAC level of 0.10 percent may be automatically charged "impaired" while the individual must have a BAC of 0.15 percent to be charged with DWI. Maryland also has an expressed consent law, rather than an implied consent law. This requires the driver's license applicant to sign a statement agreeing to submit to a chemical test of blood alcohol content should he be asked to do so by a law enforcement officer.

The rehabilitation efforts at the local level are controlled primarily by the local county (including Baltimore City) health department. Individuals attending the DWI schools who are in need of additional rehabilitation treatment are referred to the professional staff in the county health department, where they are counseled and provided treatment, or referred to other treatment facilities, as appropriate.

DWI schools have been established in all 24 local county health department subdivisions. The DWI schools are under the auspices of the State Department of Health and Mental Hygiene's Alcoholism Control Administration.

The establishment of DWI schools in Maryland has been accomplished with only small amounts of Federal highway safety funds at the local level, principally funneled through the Alcoholism Control Administration. The source of funding is generally from the local jurisdiction for startup purposes, with the idea that the school will become self-supporting through fees charged to those attending.

Though the judges have had discretion in the disposition of alcohol offenses, there were no appropriate alternatives prior to the initiation of the Baltimore ASAP and the local highway safety funded DWI school project. The court system has been improved with the ability to retrieve driver licensing records using remote computer terminals tied directly to the State Motor Vehicle Administration's (MVA) central driver licensing file.

Three seminars for judges have been conducted since 1972 in connection with the ASAP program. Current

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## MARYLAND

plans are to hold annual regional conferences for personnel associated with the DWI program. Professional training of rehabilitation personnel is the responsibility of the local health department and all such personnel are required to meet State and local requirements. Annually, since 1974, a Statewide alcohol highway safety institute has been held at Washington College. The attendees include DWI instructors, court personnel, driver licensing personnel from MVA, and law enforcement staff from both State police and local agencies.

Beginning in 1973, the Maryland State Board of Education, under contract with ASAP, developed a set of four curriculum guides (for K-12 levels) for use in the Baltimore City schools. Since ASAP, approximately 80 percent of the school systems in Maryland are using

these guides in varying degrees in their school health programs.

As an outgrowth of the ASAP program, the Motor Vehicle Administration initiated a DWI education-type school conducted in the City of Baltimore which has now been approved for funding with State funds. The project was initially funded with Federal highway safety monies primarily to continue the evaluation effort.

A very significant change in the State law took place in 1974 when the legislature removed the provision mandating license suspension or revocation for DWIs. Now the Motor Vehicle Administration has discretionary powers to revoke or suspend licenses of drivers convicted of driving when impaired or intoxicated.

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# MASSACHUSETTS

The Commonwealth of Massachusetts has made significant progress in its alcohol safety programs during the 1970 to 1976 period. The major factor in bringing about this change has been the Boston ASAP, which was operational from 1972 through 1974. An important milestone was achieved in July of 1974 with the passage of a law establishing a comprehensive statewide DWI rehabilitation program based on countermeasures demonstrated in the Boston ASAP. The Commonwealth changed from relying solely on a high penalty for DWI to procedures which give the judge the option of sending the violator to a driver retraining and rehabilitation school in addition to prior statutory punishments.

The Division of Alcohol in the Department of Public Health has a full-time alcohol safety director. His prime responsibility is coordinating the countermeasures activities of the court, the Department of Probation, the Division of Alcohol of the Department of Public Health, and alcohol safety activities of the State's eight regions.

The Governor's Highway Safety Bureau has been financing 40 hours of breath-test training for approximately 300 local policemen every year and assists local communities in the purchase of breath-test equipment. All State Police are now required to attend a 40-hour course in alcohol countermeasures. Since 1968, approximately 3,500 State and local officers have received alcohol detection training.

Twenty chemical breath-test devices have been purchased each year for use by local communities. The devices are placed in accordance with requests from the communities and priorities determined by the Director, Governor's Highway Safety Bureau.

In 1972, a law was enacted which lowered the blood/alcohol concentration level (BAC) for a presumption of drunken driving from 0.15 percent to a 0.10 percent. This reduction of the permissible BAC level and the special alcohol training and equipment for the police has been instrumental in the increased apprehension of DWI's. In 1970, 8,574 drivers received citations. In 1976, DWI citations were issued to 17,735 drivers. Special enforcement patrols are used on holiday weekends. Following arrest the offender faces upgraded prosecution of DWI cases. The assistant district attorneys advocate and assist in the implementation of alcohol countermeasures.

The enactment of the diversionary sentencing system in 1974 has given judges more discretion in sentencing convicted DWI offenders. Some persons convicted of DWI may be placed on probation for 1 year. During probation the person is assigned to a driver education program or to a treatment or rehabilitation program. After a 60-day period and within the completion of a program, the court can reinstate the driving privilege to a convicted DWI.

Judges now get presentence investigation data from the Registry of Motor Vehicles and rehabilitation participation records from Department of Alcoholism. In addition, a DWI tracking system is now in operation and records are kept on all phases of the judicial and rehabilitation activity. Highly trained probation officers conduct thorough PSI's of DWI offenders. All persons convicted of DWI who are referred to alcohol education and treatment are supervised by probation officers. These changes incorporate judicial countermeasures recommended by the Boston ASAP for Statewide use.

Clients are charged a \$200 fee to support the rehabilitation program. The courts collect the fee and remit it to the State Treasurer who maintains a special account available only for DWI program expenditures. Currently, all 73 district and municipal courts are served by the program.

The Boston ASAP held eight alcohol safety seminars in various State locations for judges, police, and rehabilitation workers. These seminars have helped stimulate alcohol awareness throughout the Commonwealth and have acquainted District and Municipal Courts with the disposition options available.

Since 1971, the curriculum for driver education contains a section on alcohol. Recently, legislation has been enacted which calls for more training for driver education instructors. Though the final curriculum for this additional training has not been adopted, increased emphasis on alcohol and drug abuse is expected.

A section on Alcohol and Driving has been prepared for the new revision of the Massachusetts Driver Manual. This will fill an informational void created by the absence of this material in the present manual.

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# MICHIGAN

Since 1970, a number of activities have taken place which have helped develop a comprehensive statewide program to identify problem-drinker drivers and provide remedies. At present, over 300 jurisdictions with a total population in excess of 6 million have alcohol safety projects.

To provide a focus on the drinking/driving problem, a "Governor's Task Force on the Drinking Problem" was appointed and first met on January 1, 1970. Members from government and the public were included on the task force.

In 1973, a major State agency, the Office of Substance Abuse Services (OSAS), was created within the Department of Health to coordinate the availability of facilities for diagnosis, treatment, and rehabilitation of drinking drivers with enforcement agencies and the courts.

Although no one individual has been officially delegated to manage the alcohol safety program, the Governor's Representative (Director, Office of Highway Safety Planning) helps facilitate interagency coordination.

The Washtenaw County ASAP, operational from 1971 through 1973, helped develop countermeasures and provide a high visibility for the drinking and driving problem.

The State now requires a section on alcohol in relation to highway safety in the 240 hours of police recruit training. Through 1976, over 600 officers have received training on how to detect impaired drivers and collect evidence for court testimony. To supplement this training, Michigan's 83 counties now have over 200 breath-testing sites.

Additionally, specialized alcohol workshops are conducted for training. These workshops are used as refresher courses for the approximately 2,000 trained breath testers who must be recertified each year.

During 1973, a major portion of the Federal funds used for the Fatal Accident Reduction Enforcement (FARE) demonstration program were used by the State and local police in a six-county effort to improve alcohol enforcement. Many of the State's local communities

have subsequently adopted the FARE operational concept of assigning officers to high accident areas during peak drinking hours. As a result of this and other efforts, about 38,000 DUIL arrests are made each year.

In April 1977, Michigan revised its laws, giving greater discretion to the courts regarding sentencing. Courts now have authority to set terms of driver's license suspensions and notify the Secretary of State to take action.

Michigan has had a statewide District Court System in operation since January 1, 1969. This helps assure a uniform disposition of cases involving the drinking driver. The District Court Administrator's Office, working with OSAS, provides coordination of facilities for diagnosis, rehabilitation, and treatment.

In 1972, Wayne State University developed a seminar curriculum for judges, prosecutors, court administrators, and enforcement personnel. The wide range of study includes the legal basis for intoxication tests, procedures for alcohol testing, sentencing and disposition alternatives, and administrative procedures used to suspend, revoke, or reinstate a driver's license. Procedures have also been developed and are promoted to ensure uniform data collection and accounting of traffic law convictions, fines, and other fees.

In the early 1970's, indices were developed to provide early identification of potential high risk drinking drivers. This system uses the data available through the State Driver Licensing and Improvement Division's mechanized driver file. Thousands of drivers have been interviewed and referred for treatment. During calendar year 1975, 34,255 tests were conducted, and 12,103 persons were referred to an alcohol therapy agency for assistance.

Alcohol-related material has been built into traffic safety curriculum for students in grades 7 through 9. About 3 hours of the 30-hour driver education course is devoted to alcohol.

In 1970, the State Safety Commission created the Michigan Traffic Safety Information Council which has since developed radio spots and other public information materials.

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# MINNESOTA

The progress made in the Minnesota alcohol program is in large part related to the NHTSA-sponsored Hennepin County ASAP. It was through this ASAP Program, which started in 1970, that Minnesota began to dispose of its drinking driver problem.

Since 1970, the Minnesota Legislature has passed laws:

(1) requiring a driver to provide a sample of his breath for an immediate preliminary screening before arrest;

(2) making it illegal to operate any vehicle with a BAC of 0.10 percent or above (Illegal Per Se Law);

(3) requiring a PSI and evaluation of drivers with a BAC of 0.10 percent or above, or those convicted of reduced charges resulting from a DWI original charge;

(4) requiring all chemical tests taken by enforcement agencies to be reported to the Commissioner of Public Safety; and

(5) providing for fines up to \$1,000 and/or imprisonment for up to a year for drivers convicted of DWI or for having refused to take a chemical test.

The Office of Traffic Safety of the Minnesota Department of Public Safety has the overall program responsibility for traffic safety activities. This Section coordinates its activities with the Department of Public Welfare, the Attorney General's Office, other law enforcement agencies, and the Driver and Motor Vehicle Services Division. The Traffic Safety Section serves as the alcohol coordinator through its membership on the Interdepartmental Chemical Dependency Coordinating Committee of the Department of Public Welfare. As part of this responsibility, the Section coordinates alcohol training and program activities with the named agencies.

With the "Illegal Per Se" Law and an increase in specialized alcohol detection equipment (evidentiary blood-testing devices, mobile vans, and video tape), the police have greatly expanded their DWI enforcement effort. Scientific blood-testing devices are within 20 miles of 90 percent of the State's population. Each year, 125 new certified breath-test operators are trained to

maintain a level of 900 qualified persons. In addition, 416 preliminary breath test devices are used for prearrest violator screening. Statewide DWI arrests have increased from 17,302 in 1973 to 19,947 in 1976, and DWI convictions have increased from 8,634 in 1970 to 11,445 in 1977.

As an outgrowth of the ASAP effort, judicial disposition of a person arrested for DWI must, by 1976 legislation, include a PSI. To aid the courts in this PSI requirement, the Driver License and Motor Vehicle Services Division has created a "hot line" which provides the courts with driver licensing information.

The diagnostic function performed by the statewide PSI is the first step in directing the alcohol offender into the proper treatment modality. These modalities include in and outpatient hospital care, Alcoholics Anonymous, half-way houses, and DWI clinics.

To assist in the alcohol program, the Department of Public Safety has expanded its DWI clinics (for Driver License Evaluator and Court Referral Programs) and now has 44 clinics in 42 of the State's 87 counties. Attendance at these clinics has grown from 1,669 in 1973 to about 3,000 in 1976. All persons attending these clinics enter the statewide DWI client tracking system which is used to determine the progress the client is making.

Driver Education students receive from 1-½ to 3 hours of alcohol safety education. To assist in this effort, nearly 1,000 driver education teachers have received AAA's alcohol training packages through recent statewide workshops.

The Minnesota alcohol public information effort conducted by the Department of Public Safety includes radio and TV spots (especially those developed by NHTSA), an alcohol brochure enclosed with the vehicle registration mailer, and alcohol youth surveys.

Twenty-three percent of the population are covered by a comprehensive alcohol program (Hennepin County) and 77 percent are covered by partial alcohol projects (all remaining 86 counties).

# MISSISSIPPI

In 1971, the Governor's Highway Safety Program established the Office of Alcohol Countermeasures to coordinate all alcohol safety activities within the State. The office provides a liaison function for the State's 82 counties and 275 municipalities on matters relating to drinking drivers.

Since 1971, \$2,014,400 (nearly one-third) of the State's Federal Highway Safety apportionment has been expended in alcohol programs such as: implied consent training of State and local police at the Mississippi Law Enforcement Training Academy, postmortem BAC analysis project by the State toxicologist, DUI driver education schools, and the Governor's alcohol countermeasure program.

Training of law enforcement officers in violator detection and breath-test procedures is provided by the Mississippi Law Enforcement Academy. Satisfactory completion of this training makes the trainee eligible for certification by the State Board of Health. In 1972 and 1973 a basic core of 800 State and local officers were trained and certified. Since 1974 about 100-150 officers per year are trained as replacements for vacancies that are created. Since 1972 a total of 1,308 officers have been certified.

DUI arrests have increased from 15,571 in 1972 to 21,253 in 1976. Local enforcement officers arrested 68 percent of the DUI's and the State Patrol accounted for 28 percent. The following table shows the record of arrests by State and local officers since 1972.

**DUI Arrests 1972-76**

	City	County	Patrol	Other	Totals
1972	7,861	2,920	4,759	31	15,571
1973	11,907	3,395	7,662	791	23,755
1974	11,271	2,751	7,058	707	21,787
1975	11,981	2,058	5,339	391	19,769
1976	12,303	3,356	4,776	818	21,253
	55,323(54%)	14,480(14%)	29,594(28%)	2,738(02%)	102,135(100%)

Alcohol-testing devices are located in every county seat, and at least one is placed in each city with a population of 10,000 or more. The total number of testing units in the State is 142. When a suspect refuses to take an evidentiary test, the refusal is noted on the citation. The suspect's driver license is taken by the arresting officer and mailed to the State Department of Public Safety's Driver Improvement Bureau. The refusal penalty is a 90-day suspension of license.

A DWI detection and apprehension course for law enforcement officers is also conducted in the State. The course is taught at the Mississippi Law Enforcement Training Academy once every 6 weeks to Highway Patrol recruits and registered local law enforcement officers. Additionally, for local convenience, courses are conducted in local jurisdictions upon request, and they are taught in 2-hour sessions over a period of 6 weeks. To date, about 350 officers have been trained at the academy and 210 at local sites.

Mississippi law allows a judge discretion in sentencing DUI offenders. Under the Implied Consent Law, a DUI conviction results in a mandatory revocation of the driver's license for a period of 1 year. However, a statute passed by the legislature in 1973, permits the court to allow a first offender to attend a 10-hour Alcohol Safety Education course. Upon completion of the course, the offender may have his driver's license reinstated for a probationary period of 2 years. Any subsequent traffic offense conviction within that 2 years results in an automatic restoration of revocation.

The Mississippi Alcohol Safety Education Program (MASEP) began in September 1972 with two pilot schools in Tupelo and Columbus with a grant of \$5,000 from the Division of Alcohol Abuse and Alcoholism of the State Board of Mental Health. The MASEP has received assistance from the Mississippi Highway Patrol, The Governor's Highway Safety Program, and the Social Science Research Center of Mississippi State University.

Projects approved by the Governor's Highway Safety Program have expanded the MASEP from two to seventeen schools. Every Mississippi citizen is now within a 40-mile driving distance of a MASEP School. The MASEP provides PSI and referral as well as the education of problem drinkers.

In 1974, the Health Department's Divisions of Alcohol Abuse and Alcoholism began making HEW formula grant money available to the various regional mental health centers with high priority placed on accepting referrals from MASEP Schools. The use of these monies thus provided a key building block toward developing a comprehensive self-supporting system for the referral and treatment of DUI Law offenders.

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## MISSISSIPPI

In 1975, an NHTSA-funded DUI Probation Follow-up Program became operational at nine MASEP sites: Greenwood, Tupelo, Starkville, Columbus, Meridian, Gulfport, Biloxi, Ocean Springs, and Pascagoula. In these communities, a systems approach for handling the drinking driver has become operational. Under this system, all offenders with BAC levels at 0.10 percent or above are booked and charged for DUI. By agreement with the judiciary and police forces, all offenders are required to appear in court for disposition of their cases, and are assigned to a treatment program.

Assignment to a treatment program follows a PSI and this integrates the treatment component into the total system with enforcement and the judiciary. Under MASEP, offenders are referred to alcohol safety schools only. In the DUI Probation Follow-up Project, they are assigned either to alcohol safety schools, probation, group therapy in the mental health center (structured intervention), or to a control group. Since 1972, about 800 judges have referred 4,866 offenders to MASEP

Schools with 4,321 enrolling and with 4,022 having completed the necessary requirements.

The Office of Highway Safety has been responsible for alcohol safety public information and education. The alcohol countermeasures staff was available for conducting alcohol use and highway safety programs for civic, religious, social, or private organizations. One specialist concentrated almost entirely on educational programs for the junior and senior school students. Radio-listener surveys and on-the-street interviews were used in determining public opinion concerning alcohol and driving. Public information from NHTSA, especially radio and television spots with a local highway safety tag line, was used.

Recently, a ruling by the State Attorney General declared that the State's implied consent law provides immunity for extracting blood samples. Since this ruling, blood sampling of fatalities has increased.

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# MISSOURI

Missouri's legislative and safety community has long recognized the threat to public safety created by intoxicated vehicle operators. In 1909, statutes were enacted which addressed intoxicated stage drivers and pilots/engineers. Since this early start, numerous changes have been made in an effort to control drinking drivers. Some of the more recent changes include the lowering of the presumptive BAC from 0.15 percent to 0.10 percent (1972), BAC testing of drivers and pedestrians who die within 4 hours of an accident involving a motor vehicle (1973), and an Illegal Per Se Law at 0.10 percent BAC (1975).

The Highway Safety Act of 1966, as implemented by Missouri in 1967, had a positive influence on State and local traffic safety programs. The Kansas City ASAP, funded with Federal demonstration project funds and initiated in 1971, further influenced alcohol safety programs.

In 1974, Missouri began to employ a planned approach in counteracting the DWI problem in the State. The Division of Highway Safety, Department of Public Safety, formed an Office of Traffic Law Systems responsible for improving the processing of traffic court cases, particularly DWI cases, and developing referral capabilities for use by local courts. This activity continues to be carried out by the Traffic Law Systems Office, under the guidance of the Director of the Missouri Division of Highway Safety, in close coordination with the State Court Administrator. Concurrent with the development of the Traffic Safety Systems program, the Missouri Department of Mental Health, designated by Executive Order as the Missouri Alcoholism Authority, began using certain aspects of the Missouri DWI program in its State Plan for the "Implementation of the Comprehensive Alcohol Abuse and Alcoholism Prevention Treatment and Rehabilitation Act of 1970."

In 1977, the Director of the Missouri Division of Highway Safety established the position of an Alcohol Program Coordinator. This person has responsibility for developing coordination among a variety of fragmented DWI programs in the State.

Direction, support, and funding for the State's alcohol programs comes from a variety of sources. The Missouri Division of Highway Safety provides direction and funding support for local police traffic services' drinking driver enforcement programs, court processing

of drinking driver cases, court drinking driver referral programs, and State/local drinking driver public information and education programs. The Department of Mental Health provides direction, funding support, and facilities for local problem-drinker driver rehabilitation programs. Law Enforcement Assistance Administration grants are also used to support services for the alcohol programs. The Department of Probation and Parole provides drinking driver referral services for several courts. The Court Administrator of the State Supreme Court provides advice, direction, and coordination to local courts regarding drinking driver case processing. The State Department of Health provides curriculum, training, and direction for local school district alcohol instruction in Driver Education Courses. This agency also provides calibration, validation, and certification services for breath-testing equipment within the State, including court testimony when required.

As of June 1, 1977, the State of Missouri had 30 active Alcohol Related Traffic Offenders' Programs (ARTOP) and one ASAP in operation. These projects are in 100 of the 115 counties in Missouri, and provide coverage to more than 95 percent of the State's population. St. Louis County was the originator of the "Missouri Plan" and all other ARTOP's are patterned after this project. Successful aspects of the Kansas City ASAP demonstration project that are fiscally within reason were emulated to a degree by these ARTOP's.

DWI enforcement capability in the State has been improved through increased and specialized training of police officers in detecting and apprehending offenders, and through the procurement of chemical test equipment. Training of enforcement officers is provided through the Missouri State Highway Patrol, the Central Missouri State University Traffic Management Institute, the University of Missouri, the Columbia Extension Service, and the five Police Regional Training Centers at St. Louis, Kansas City, Springfield, St. Joseph, and Joplin. The State Highway Patrol provides DWI enforcement training for local police.

Since the development of local referral programs throughout the State, the courts in Missouri have alternatives to them in lieu of or supplemental to past sanctions of fine and/or incarceration. Special training for judges is provided periodically by contract through coordination with the State Court Administrator's

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## MISSOURI

Office. There has been an improvement in the information flow and exchange through the establishment of driver history accessing terminals provided by the Missouri Division of Highway Safety.

Diagnosis and referral of DWI offenders to various rehabilitation modalities have been improved through formation of the 30 ARTOP's and one ASAP. The Mental Health Department has developed local alcohol referral centers which provide treatment of DWI referrals. Also, the State Department of Probation and Parole coordinates with the Missouri Division of Highway Safety Alcohol programs and provides several referral services throughout the State. Local rehabilitation agencies primarily coordinate with State Rehabilitation Agencies and, to a lesser degree, with local courts. Alcoholics Anonymous participates quite actively as an extension to several local referral programs

in the State, and provides attendant counseling.

The Missouri State Department of Education is currently implementing a driver education alcohol program for use statewide. This program includes curriculum development and in-service training of secondary driver education teachers. Driver education was available to students in the western half of the State in 1977, and it is anticipated that the remainder of the State will be covered in 1978.

The Missouri Public Information Program was improved in 1974 by the appointment of a Public Information Officer in the Missouri Division of Highway Safety. This expanded public information and education effort has been general in nature. Efforts are now being directed to modify this general approach and to use this Office for direct support of State and local alcohol programs.

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# MONTANA

As a result of legislation passed in 1977, the Montana Highway Traffic Safety Division (MHTSD) will assume the role of the coordinating agency for establishment of statewide alcohol treatment programs. The programs will be funded through regional mental health groups with MHTSD establishing the criteria for program approval. Program activity will be coordinated with the State Department of Institutions and the Department of Justice. Prior to the new legislation there was no full- or part-time alcohol director or coordinator in the State.

Technical training for local countermeasure personnel is provided by MHTSD. Outside assistance has been used in the training of rehabilitation counselors.

The courts have access to information for use in case disposition through the development of an automated driver history file. In 1975, a section on alcohol, as it relates to driving, was included in the State driver license manual. Questions pertaining to the legal aspects of drinking and driving are included in the written driver license examination.

Literature addressing alcohol and driving is sent to drivers who are eligible for license renewal. Oftentimes questionnaires are included in an attempt to determine opinions/feelings of drivers concerning alcohol and driving.

Since 1970, Montana has substantially increased its violator detection equipment. Chemical breath-test and video tape machines have been purchased and are used on a regular basis and are located in Highway Patrol Districts throughout the State. The installations of breath-test instruments are so placed that 89 percent of the State's population is within 15 minutes of one of the units. All State Highway Patrolmen have had exposure to the NHTSA-developed alcohol detection course, as have many local enforcement personnel.

Arrests for DUI have increased from approximately 1,800 in calendar year 1970 to 3,800 in 1976. Throughout this period, approximately one-half of all of these arrests have been made by the Montana Highway Patrol.

Prior to the actions taken by the 1977 Legislature, Montana did not have any significant discretionary disposition system regarding sentencing of DWI's. Though plea bargaining did not appear to be a problem, deferred sentencing most definitely was. However, the actions

taken by the 1977 Legislature have considered the problem of deferred sentencing and have established alternatives to the judiciary for treatment purposes.

Legislation passed in 1977 includes mandatory jail sentences for persons convicted for the third time of DWI and removal of authority from judges to grant deferred sentencing of convicted DWI's. In many cases, the sentencing was deferred for a year and then suspended completely. Laws also passed in 1977 include implementation of alcohol court schools statewide. This includes the following elements:

- The establishment of alcohol treatment facilities for all city courts. This activity includes PSI and the offering of treatment activity for convicted DWI's.
- Judges are given the authority to grant reduced fines and jail sentences to DWI first offenders who accept the alcohol court school.
- Judges are also granted the authority on second and subsequent convictions for DWI to lower fines and penalties for persons who accept court school.

There has been an improvement in the information flow between courts and other agencies through the establishment of a statewide uniform citation. Information on the disposition by courts is now regularly available in the automated driver history file.

In 1970, very few residents were exposed to alcohol rehabilitation. During 1973, approximately 200 persons were treated; approximately 400 persons per year receive treatment at the present time. With the new statewide alcohol treatment program, it is anticipated that the number will increase to 2,800 persons per year.

Classroom hours for driver education pupils have increased from 30 hours in 1970 to 60 hours at present with increased class time devoted to the risks of alcohol and driving. The State Legislature passed a law in 1973 requiring the teaching of the physical effects of alcohol to all students. This exposure, 8 hours of class, generally is at the high school level, and in addition to that of the driver education curriculum.

Public information programs in the alcohol area are the responsibility of MHTSD. Public information program materials disseminated throughout the State have

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## MONTANA

been largely Federal publications. Specifically, "Young Americans: Drinking, Driving, Dying" and "The National Alcohol Countermeasures Program" have been distributed. In addition, the State prepared its own brochure in 1973 and approximately 90,000 of these have been distributed primarily as stuffing material with return of renewed drivers' licenses.

There are two partial alcohol traffic safety projects in the State: Billings, which became operational January 1,

1973; and Great Falls, which commenced operations on January 1, 1975. These two city projects cover over 31 percent of the State population. Both projects received initial funding with highway safety funds, with the local city judge acting as the contracting agent. The projects were designed to establish PSI activity for all convicted DWI's within the city, plus each neighboring court in the immediate area. Both projects plan to continue with local funds following discontinuance of Federal highway safety funds.

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# NEBRASKA

Overall, the detection, arrest, processing, adjudication, and rehabilitation of persons DWUI has improved greatly since 1970. This has resulted from many changes in legislation, addition of blood alcohol measuring equipment, and training for those persons involved in an alcohol safety system. The upgrading of the court system and improvement of rehabilitation services have also made significant contributions. Additionally, the management and coordination efforts of the Nebraska Highway Safety Program and the Nebraska Division on Alcoholism have been instrumental in creating an organized approach to the alcohol problem in Nebraska.

The Director of the Division on Alcoholism (DOA), Department of Institutions, is established as the State's single alcoholism authority based on an opinion by the State Attorney General in April 1972. In addition to reviewing all highway safety program alcohol projects involving State and local agencies, the DOA promotes and/or establishes cooperative relationships with a broad spectrum of agencies involved in alcohol programs.

The Office of the Governor's Highway Safety Representative plans, initiates, implements, monitors, and evaluates all highway safety alcohol/traffic projects, alcohol equipment, and alcohol training/public information and education projects directly, or through coordination with other State agencies or local political subdivisions.

Local programs, using highway safety funds, are managed and coordinated through the Nebraska Highway Safety Program Office (NHSP). Alcohol programs receiving grants or certification through DOA are also managed and coordinated.

Highway Safety Program agreements include reporting and evaluation requirements. Additional alcohol-related records from various systems which may be used in evaluation are: law enforcement agency reports on DWI arrests and disposition of the charges; and court reports to the Department of Motor Vehicles (DMV) on DWI convictions and probations in those instances where the information is made a part of a driver's file. DWI convictions reported to the DMV, excluding probation, reached 5,192 when arrests were reported at 7,961.

In 1975, with the assistance of highway safety funds, the computerization of the driver license file was completed. Driver history files are now readily available to local courts and law enforcement agencies.

The State Driver License Manual discusses the hazards related to drinking and driving. The point assessment system and implied consent are discussed. A chart indicates the potential effect that different percentages of alcohol in the blood have upon the body.

Equipment in the form of 441 prearrest screening devices, 32 gas chromatographs, and over 7,000 alcohol-test collection kits have been purchased. Distribution of the equipment to various law enforcement agencies throughout the State has been completed.

Since 1975, basic training for the Nebraska State Patrol has included 4 hours of instruction relating to applicable laws and the detection, arrest, and processing of alcohol-related driving offenses. Additionally, each graduate is required to serve, for a 6-month period, with a veteran officer to attend basic training which includes 2 hours of instruction relating to alcohol/driving violators.

State Patrol arrests for DWI have increased from 997 in 1971 to 1,818 in 1976. Overall, DWI arrests in the State increased from 3,089 in 1971 to 7,961 in 1976.

Improved information flow between courts and State agencies has resulted in more readily available driver histories for court use. This has enhanced coordination with other organizations and agencies.

Alcohol counselors and local alcohol safety program administrators participate in training programs made available by the Alcohol School for Alcohol Studies which was initiated in 1969 by the DOA.

A DWI client tracking system is maintained by each funded alcohol/traffic safety program. Probation officers statewide also utilize a client tracking system.

In 1976, an alcohol curriculum developed by NHTSA was adopted by the Department of Education. Workshops covering the curriculum were held for driver education teachers in those areas in which youth alcohol/driving accidents were running high. The curriculum was implemented in 29 schools in the spring of

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## NEBRASKA

1977 and provides 4 hours of alcohol-related instruction.

Public information and education directed toward the alcohol/driving problem is the responsibility of the DOA. The DOA coordinates its public information activities with other State and local agencies.

The previous federally-funded Lincoln ASAP is being continued. It is, at present, a partial program incorporating cooperation between the court probation office, the police department, and rehabilitation services.

Other partial alcohol programs have been established in Scottsbluff, Adams, Red Willow, Dodge, Sarpy, and Hall Counties with highway safety grant funds. With the Lincoln and Omaha programs, approximately half of the population is served by an alcohol safety program. These programs include a coordinator, and reporting requirements. Activities of these programs include PSI, public information and education, client education, counseling, followup, and coordination with the courts, police departments, probation, and alcohol rehabilitation services. Many of these programs provide services to surrounding counties. State and local funds and client fees are used in funding these programs.

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# NEVADA

The Office of Traffic Safety (OTS-Governor's Representative for Highway Safety) provides a base for alcohol safety since it provides program funding in the area of law enforcement operations and training, PSI, chemical breath-test equipment purchases, and training of adjudication personnel. The Bureau of Alcohol and Drug Abuse (BADA) is the rehabilitation branch of the alcohol safety program.

The Nevada Highway Patrol (NHP) and 15 Sheriff's and Police Departments have established a cooperative statewide program to increase the apprehension and conviction of drivers under the influence of alcohol. The basis for this program is the dispersion of breath-testing devices placed strategically throughout the State.

Special alcohol enforcement patrols have been operated in Las Vegas, Reno, and Carson City. Also, the NHP has upgraded its selective enforcement effort with an emphasis on accident-causing violations at the times and places of accident occurrence. Manpower assignments are made on this basis, creating increased DWI enforcement where alcohol abuse is an accident factor. There has been some use of audio and video tape recorders, principally as a part of the DWI booking process.

All chemical breath-testing operators are required to take a 4- to 16-hour training program developed by both the Highway Patrol and the Division of Health.

Additionally, there is an 8-hour course of instruction on DUI enforcement which is being given to all 130 troopers and supervisory personnel in the Highway Patrol. The course will be offered to all law enforcement agencies after this course of instruction is completed by the Highway Patrol.

Some courts are using the fine as a punishment for first DWI offenders and urging them to attend traffic school, while second and subsequent offenders are urged by the court to attempt to get more extensive help. Courts are required to send records of convictions to the Department of Motor Vehicles.

All nonattorney judges in the State are required to attend National College workshops. The Nevada Judges Association holds an annual meeting, which is attended by about 95% of the Judges. Alcohol subjects are a

large part of the proceedings of such meetings. Two court clerk seminars are scheduled to be held in 1978, and alcohol will constitute a large proportion of the seminar subject matter.

Under an ongoing traffic safety grant, a traffic court specialist has been hired to review the existing traffic court system and make recommendations to improve and upgrade the traffic courts in the State.

BADA is the single State agency responsible for substance abuse programs. The agency coordinates Federal and State funds to assure quality of service and to avoid duplication of effort. The agency's primary efforts are directed towards providing services and treatment facilities for identified substance abusers.

Comprehensive DUI referral programs are operated by the courts in Las Vegas, Reno, and Carson City. In each of these cities, the program is funded through a client fee system and supported with highway safety funds. Traffic Safety Schools conducted by the Department of Motor Vehicles include alcohol education as part of the curriculum. OTS is funding referral programs in seven rural locations in the State.

It is estimated that between 2,000 and 2,500 clients entered some type of alcohol safety school during 1977, including about 1,700 who participated in group therapy. Completion rate is estimated at 80 to 90 percent.

Five hours of the recommended high school driver education curriculum are devoted to alcohol safety education. In addition, the State requires a one-semester health class curriculum, which includes the risks of alcohol and driving.

The State requirement for secondary school driver education teacher certification is 3 semester hours, including 1 hour devoted to alcohol. Also, in-service alcohol safety programs for secondary school driver education teachers are held. These correlate with the Governor's Youth Traffic Safety Conference and with the basic course of driver education at the University of Nevada.

The Office of Traffic Safety is responsible for public information and education. Prior to 1975, this program

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## NEVADA

was one of limited news coverage on a sporadic basis. During 1975, a communications plan was developed for the State, and public service announcements for radio, television, and newspaper outlets were developed and distributed. These included an alcohol campaign, as well as emphasis on the risks of drinking and driving as part of holiday campaigns.

During the months of November/December 1976 and January 1977, a special alcohol awareness campaign was conducted. A news release went out early in November to all wire services, radio-TV stations, and newspapers in Nevada and many in northern California. The release was aired on all evening newscasts of Reno TV stations. This was followed by a public service announcement campaign in which four radio spots were sent to public service directors of all radio and TV stations in Nevada and northern California. These spots were aired frequently, and were seen and heard in such prime time spots as the professional football games, and afternoon and evening newscasts. Five copy spots were

also distributed in time for the Thanksgiving holiday and were aired through January 2.

Other activities in 1976 included development of a special brochure on alcohol-related traffic laws. More than 20,000 were distributed. An alcohol and traffic safety booklet was distributed widely, and an adaptation of an Oklahoma 30-second TV spot on BAC (Know Your Limits) was distributed to all Nevada TV stations. Wide use has been made of DOT TV spots with OTS tagline. The DOT newspaper mats on teenage drinking and driving were also distributed to all State dailies in December 1976. Slides of DUI crashes were delivered to Nevada TV stations for special news features on alcohol crashes. OTS joined BADA on a special newspaper supplement on alcohol which was delivered to more than 146,000 Nevada homes in March 1977.

OTS has also funded an Industrial Education Program through the Nevada Safety Council. This program presents information on the drinking driver to employee groups throughout the State.

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# NEW HAMPSHIRE

The statewide federally-funded ASAP, which became operational in 1972, has had a profound impact on the State's alcohol safety program. With the full cooperation of the Governor's Representative for Highway Safety, the ASAP program succeeded in establishing a drinking driver control program. The follow-on ASAP program is centrally coordinated and services all parts of the State.

The following legal and administrative changes have taken place largely as a result of the national focus on the drinking driver problem and the operation of the ASAP:

- In 1971, legislation was passed allowing for the use of breath-test equipment. The point of intoxication was established at 0.10 percent.
- In 1973, the State passed the following laws:
  - (1) An Implied Consent law. Persons refusing to submit to an alcohol chemical test may have their license revoked for 90 days.
  - (2) A Blood Alcohol Concentration law making a BAC of 0.10 percent or above prima facie evidence that a person was under the influence of intoxicating liquor.
  - (3) A law which provides for additional penalties for DWI repeaters.
  - (4) An "Habitual Offender Act" which provides that, if a driver receives three convictions during a 5-year period, he may have his license revoked for a 4-year period.

The New Hampshire Highway Safety Agency headed by the Governor's Representative plays the key role in all highway safety activities. The Traffic Safety Commission, whose members are appointed by the Governor, serves as an advisory group to this agency. The Governor's Representative serves as coordinator of the State Highway Safety Agency which works through a network of local regional and municipal highway safety committees. The Highway Safety Agency continues to provide assistance in the enforcement and training areas.

The Highway Safety Agency and the program on Alcohol and Drug Abuse work closely in the promotion and implementation of all the important elements of the drinking/driving control program such as enforcement, training, and public information.

The Police Standards and Training Council works with both the State and local police in developing and implementing strategies for drinking driver apprehension.

During 1972, under the administrative umbrella of the Police Standards and Training Council, a 40-hour alcohol enforcement and breathalyzer use course was established. Since that time, close to 900 State and local police officers have completed the course. The State has a control program which requires periodic breath-test operator recertification. In addition to the 40-hour course already mentioned, the State has conducted a series of 1-day seminars on drinking driver control for enforcement officers at seven different locations throughout the State. To date, about 600 full- and part-time enforcement officers have completed the seminars on drinking driver control. There are about 75 chemical breath-testers available for use in the State.

During 1972, special DWI enforcement units were created within the State Police. These units (known as monitor teams) were comprised of selected officers who were given special training in apprehending DWI offenders. The monitor teams, directed by the ASAP enforcement coordinator, were deployed in various locations across the State. After this approach had been in use for about a year, the composition of the monitor teams was changed to include special selected local officers. The effect of this increased enforcement effort can be clearly seen in the DWI arrest data. During 1970 and 1971, DWI arrests in the State were running about 2,500 per year; during 1972, the number of DWI arrests jumped to 5,500; in 1973 to 7,700; in 1974 to 8,500; in 1975 to 8,600; and in 1976, 7,920. Although the special DWI patrols were discontinued during 1975, the number of DWI arrests has remained at about the same level. As a result of ASAP experience and the breath-test operators school, both the State and local police are giving the DWI problem a much higher level of attention.

Although there is no statute mandating referrals to DWI schools, a judge may offer a convicted DWI defendant the option of attending a rehabilitation program. An ASAP case coordinator services all the courts in the State, providing the necessary linkage with the rehabilitation program.

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## NEW HAMPSHIRE

When DWI law offenders are referred to rehabilitation, they are given diagnostic tests and an interview. The drivers are screened and classified as problem or social drinkers. Classes for problem, social, and young social drinkers are conducted in the driver retraining school operated by the program on Alcohol and Drug Abuse. The number of DWI clients referred to rehabilitation has increased from 466 in 1972 to 2,242 in 1976. Since 1971, the program has maintained a complete tracking system on all DWI law offenders that have entered the ASAP program. In addition, using a combination of State funds, highway safety funds, and ASAP demonstration project funds, the driver accident and violation record system was computerized.

During 1974 and 1975, the driver licensing manual was rewritten and a large section on the hazards of alcohol use and driving was included. In 1975, a set of

questions on alcohol and drinking and-driving was added to the drivers licensing testing for initial licensing.

The State requires 5 hours of alcohol safety education in the driver education curriculum. A minimum of at least 3 semester hours on alcoholism or alcohol use and driving is required as a condition for teacher certification. All driver education teachers must acquire this special training to retain their certification. In addition, the State is offering 8 seminars for high school teachers on alcohol use and abuse. Its purpose is to enable teachers to provide accurate alcohol information to their students.

A monthly newsletter on highway safety, including the Alcohol Supervisory Program, is widely distributed by the State Highway Safety Agency.

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# NEW JERSEY

The New Jersey Highway Safety Act of 1971 authorizes the Governor to establish a Highway Safety Policy Advisory Council consisting of representatives from the Departments of Transportation, Health, Motor Vehicles, Law and Public Safety, the State Police, law enforcement agencies, local government medical associations, hospital associations, the Red Cross, New Jersey First Aid Council, and rescue and ambulance associations. The Council's role is to make recommendations to the Governor to assist him in preparing and implementing the State's alcohol highway safety program.

The Governor has appointed the Director of the Division of Motor Vehicles (DMV) as the Governor's Representative for Highway Safety, thus delegating to him the authority and responsibility for administering the Alcohol Highway Safety Program. As Governor's Representative, the Director of DMV is also the Chairman of the Advisory Council. Responsibility and authority for the program administration has been redelegated by the Governor's Representative to the Director of the New Jersey Office of Highway Safety.

The New Jersey Office of Highway Safety assigned alcohol and traffic safety top priority status in the development of its 1972 Annual Work Program, which was based on 1970 traffic crash data reflecting 600 alcohol-related fatalities out of a total of 1,279 fatalities in New Jersey. A twofold alcohol safety program was developed: individual local and State projects, which consisted mainly of equipment purchases and overtime police patrols; and a 3-year pilot program to test a systems approach to the drinking driver in a four-county area. The four-county Alcohol Countermeasures Project (ACP) of the Division of Motor Vehicles began in 1973 with the authority of a special DMV regulation on disposition of convicted DWI offenders, passed in December 1972. Thus, an innovative alcohol safety program began in 1973 by implementing a referral-rehabilitation-restoration of license process to deal with convicted drinking drivers in the four-county area.

Legislation passed in February 1977 expanded this program to statewide status. The Director of the Bureau of Alcohol Countermeasures of the Division of Motor Vehicles is the full-time alcohol safety coordinator for the State. The Alcohol Countermeasure Project expansion will emphasize reducing the 1976 statewide recidivism rate from 14 to 2.5 percent. The countermeasures include: screening and diagnostic interviews; lectures

and seminars; police and judicial workshops; and media education.

In the early 1970's, the State and local police began purchasing additional breath-testing equipment. Five hundred and forty-four chemical breath-testers are now in operation by the State and local police. Most local departments and all State police barracks are equipped and staffed with breath-testers.

Twenty video tape units have been placed in operation since 1972 in those localities with low conviction rates. The use of this equipment has increased the number of persons pleading guilty. In 1975, in Byram Township, for example, 80 percent of those charged with DWI pleaded "not guilty"; whereas in 1976, with the use of video tape equipment, approximately 70 percent pleaded guilty. Experience in New Jersey has shown that use of video tape equipment has increased the number of arrests and reduced police officer court time.

Since 1972, the Office of Highway Safety (OHS) has funded local DWI patrols and purchased equipment. These consist of overtime assignments of patrolmen operating at identified high accident locations and hours. Federal funding has been used by OHS to establish traffic safety bureaus in local police departments that had none.

Special patrols at the State police level are the Tactical Patrol Units. A Tactical Patrol Unit consists of squads of nine specially-trained men, dedicated to enforcing traffic laws and patrolling locations where traffic fatalities, traffic crashes, and drinking driving occurs most frequently.

The Tactical Patrols, now financed with State funds, account for approximately 35 percent of the State police DWI arrests although they represent about 5 percent of the total force. State police DWI arrests are approximately 1/3 of total DWI arrests. All the efforts have contributed to a substantial increase in DWI arrests statewide: from 9,629 in 1970 to 22,843 in 1975.

Both State and local police recruits receive 4 hours of training on DWI subjects. This training deals mostly with law and police procedures. In 1976, the State Police Academy began using the 40-hour NHTSA course on "Identification and Apprehension of the Drunk Driver." Ninety patrolmen have completed this course.

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## NEW JERSEY

In 1977, the legislature amended the DWI statute. These amendments gave the courts and the DMV increased discretionary powers in terms of license suspension periods, fines, and jail sentences. Under the new system the Court reports DWI convictions to the DMV, which imposes a license suspension on the DWI offender. The term of suspension is dependent on the number of DWI convictions on the driver's record, the satisfactory completion of alcohol education/rehabilitation, and the payment of a statutory fee. To assist in this effort, a full-time alcohol countermeasures agency was established in the DMV to administer the new program.

The number of individuals convicted of DWI has increased significantly since 1970. During 1970, 8,439 persons were convicted of DWI (86.7 percent of those arrested). In 1975, 21,061 were convicted (92.2 percent of those arrested).

The new DWI statute of February 1977 started a state-wide alcohol highway safety rehabilitation program. To

accomplish this, rehabilitation clinics were established throughout the State. These clinics, based on a history of an offender's driving record as received from the Department of Motor Vehicles (DMV), and on an interview and questionnaire, refer offenders to either a treatment agency or to the Alcohol Safety Institute of the DMV. In 1976, the number of persons assigned to education and treatment in the four-county pilot projects was 2,310. Diagnosis and referral service is provided at 23 community college centers. This program has resulted in increasing the number of education and rehabilitation facilities to 35 and increasing from 20 to 300 persons accredited to instruct the alcohol education program.

The latest edition of the Driver's Manual contains educational material on the effects of alcohol consumption and the statutory penalties and administrative actions attendant to drunk driving conviction. The State's Implied Consent statute and each driver's obligation to it is explained. A special statement is made regarding New Jersey's prohibition against "part-time" or hardship licenses.

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# NEW MEXICO

The major drinking/driving control effort in the State of New Mexico started with DWI enforcement in the city of Albuquerque. This is due in large part to the NHTSA-funded ASAP, 1970-1973.

In 1977, the State legislature passed a law consolidating all State alcohol programs in a new Alcohol Division within the Department of Hospitals and Institutions. This Division assumed the responsibility of the prior State Commission on Alcoholism and is the sole State authority for alcoholism for the purpose of applying for and receiving available Federal funds.

Highway safety efforts have centered around the development of DWI schools, a responsibility of the Office of Governor's Highway Safety Representative.

In the area of enforcement, special alcohol patrols, functioning since 1971, have been limited to those of the city of Albuquerque. The unit patrols areas assigned throughout the city by specific locations, times, and days, based on traffic-related alcohol experience. The police make use of breath-test equipment and video tape recordings to gather evidence of alcohol-related traffic offenses. The use of video tape, initiated under the ASAP, has continued, particularly in cases when the BAC readings are between 0.05 and 0.09 percent.

Even though there is no requirement for State certification of breath-test operators, the State laboratory in cooperation with the Traffic Safety Division (TSD) provides breath-test training for police officers. Initially the State Laboratory performed all chemical testing of breath or blood specimens. The State code contains only limited reference to blood-test requirements and has no reference to breath-testing quality. Since four cities have purchased breath-testing equipment, the role of the

Laboratory has increased from testing samples to assisting with training breath-test operators. Legislation to provide for machine, personnel, and procedure certification has not yet been passed. The number of persons tested for unlawful BAC has increased from 5,853 in 1972 to 10,955 in 1977.

In the case of first DWI convictions the court may order an offender, based on PSI, to attend an approved driver rehabilitation program or DWI school. In selecting DWI offender referrals, the court selects potential students to attend the DWI training course in lieu of license revocation and submits the names of potential students to the Driver Service Division. This Division reviews the driving records to ascertain if they are in fact first-time offenders and approves students who are eligible to attend the course. Upon successful completion of the program/school, the Division executes a stay of revocation. This action becomes part of the offender's Department of Motor Vehicles record.

During the Albuquerque ASAP project, emphasis was placed on increasing awareness on the part of public officials involved in a judicial process of handling the DWI's. A series of public awareness workshops were sponsored by the Albuquerque ASAP. This type of workshop has been continued in various areas of the State under the sponsorship of the Governor's Highway Safety Office.

The State's drivers' manual has recently (1976) been revised. The revision includes sections prepared in layman's language on implied consent, the effect of alcohol on driving, and the section of the law regarding suspension and revocation for DWI. Based on the changes in the manual, it is anticipated that the driver test may be revised in the near future.

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# NEW YORK

The State of New York has been developing and implementing alcohol safety programs since 1968. The alcohol safety activities conducted by the various State agencies are coordinated by the Governor's Interdepartmental Traffic Safety Committee (ITSC) which is chaired by the Governor's Representative for Highway Safety. The Committee was established in 1967 and the major agencies concerned with alcohol safety are the Departments of Motor Vehicles, Education, Mental Hygiene, Insurance, the Division of Criminal Justice Services, and the State Police.

Although there is no full-time alcohol program coordinator, the most involved agency is the Department of Motor Vehicles, Driver Safety Unit, which administers the present Drinking Driver Program. The Commissioner of Motor Vehicles is the Governor's Representative for Highway Safety and Chairman of ITSC and places high priority on coordination with those agencies engaged in alcohol safety.

In 1968, the New York State Legislature, acting on recommendations made by ITSC, enacted legislation (Article 21) which authorized the Department of Motor Vehicles to conduct experimental alcohol safety programs. In 1975, the legislation was revised to give the Department of Motor Vehicles the authority to establish a statewide drinking driver rehabilitation program that is supported by client fees. The 1975 revised Article 21 also has provisions for restricted and conditional licensing of drivers participating in rehabilitation programs.

The 1968 legislation resulted in the following experimental alcohol safety programs financed with county and Federal highway safety funds and demonstration contract monies:

- 1970 — New York City and Monroe County Driver Rehabilitation Programs
- 1971 — Nassau County ASAP
- 1971 — "DWI Attack" in Erie, Onondaga, and Westchester Counties
- 1973 — Suffolk County DWI Rehabilitation Program

In addition to those programs, 10 local drinking driver rehabilitation programs, financed with Federal highway safety and local funds, were operated in

Albany, Broome, Chemung, Columbia, Jefferson, Niagara, Oneida, Rensselaer, St. Lawrence, and Stueben Counties.

In the fall of 1975, all the programs, except for Jefferson County, were terminated and replaced with the State-sponsored Drinking Driver Program.

The Department of Motor Vehicles has the controlling role in the State alcohol safety program planning, implementation, and evaluation. The ITSC provides the funds to all agencies to improve their alcohol countermeasures programs including: public information and education; the administration of pre- and post-licensing programs; the detection of DWI offenders through police training and equipment purchases; and education programs for traffic court judges.

In 1972, the State enacted an illegal per se law of 0.10 percent BAC with an implied consent provision. To enforce this law, chemical breath-testers have been placed in each of the State Police substations.

In 1974, the State Police initiated a 2-year program to purchase additional chemical breath-test equipment and to train additional operators. During this period, over 1,500 men were trained and 120 units were purchased. The number of breath tests have increased from approximately 300 in 1967 to over 11,000 in 1976. During 1977, the State Police initiated a feasibility project testing the use of an in-car evidentiary chemical test unit. Local police agencies have free access for use of chemical breath-test equipment.

Police recruit training in alcohol enforcement has increased from 16 hours in 1970 to 32 hours in 1976.

The Department of Motor Vehicles maintains a driver license file which contains a record of all DWI convictions for at least 10 years from the date of violation. Any type of alcohol rehabilitation is noted in the record. At present, only the judges in the cities of New York, Buffalo, and Rochester can access the file prior to sentencing a DWI client. Although a sentencing judge can specifically bar a person from entering an alcohol rehabilitation program, the Jefferson County demonstration project does refer DWI clients to a local rehabilitation program while postponing the sentence.

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## NEW YORK

In FY 1976, the ITSC conducted the first of 25 alcohol safety workshops for local officials, including judicial personnel.

The New York State Drinking Driver Program (DDP) became effective in 1975 and local county mental health clinics are now providing service to more than 15,000 DWI clients each year. This is a substantial improvement over the period from mid 1970 to mid 1975, when a total of less than 15,000 clients attended the experimental DWI rehabilitation programs.

The State has developed a comprehensive alcohol safety curriculum guide organized into three parts: K-12, 7-12, and adult continuing education. In mid

1976, the State began a training course entitled, "Driving While Intoxicated Mini-Course (DWI)" which is required for all secondary school administrators, and driver education and health instructors. In 1976, 413 instructors took the course.

All agencies in the ITSC participate in the development and production of alcohol safety public information and education materials. The Department of Motor Vehicles distributes the material in the "Learn and Live" program. Other non-ITSC sources, the State Traffic Safety Council, AAA, and insurance companies provide alcohol safety public information and education campaign material. Alcohol flyers are mailed by the Department of Motor Vehicles with vehicle registration and license renewal forms.

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# NORTH CAROLINA

The Governor's Highway Safety Representative has served over the years as the principal director/coordinator of the State's alcohol programs, especially when Federal highway safety funds are being used. Operationally, the alcohol program is divided among several independent State agencies, such as the State Highway Patrol, Department of Human Resources, Community Colleges, The Department of Public Instruction, and the Institute of Governments (Judicial). While the lines of individual responsibilities are strictly observed to prevent conflicting overlap, there is a strong interagency rapport which serves to coordinate the program. The State agencies request or contract for the assistance of the Highway Safety Research Center of the University of North Carolina in evaluating the effectiveness of alcohol and other programs. Additionally, the Research Triangle Institute has also assisted in planning, programming, and evaluating highway safety activities.

The overall program was greatly enhanced by the NHTSA funded ASAP in Mecklenburg County, which was in operation from 1970-1973.

North Carolina has had a strong Implied Consent Law since 1973 when a refusal loophole was closed. Other significant alcohol-related statutes include:

- the authorized use by the police of preliminary roadside breath-test devices;
- an Illegal Per Se Law which makes it unlawful to operate a vehicle with a BAC level of 0.10 percent or more; and
- a limited driving privilege statute that authorizes a trial judge to issue a restricted driving license to any person whose license has been revoked because of a first DUI conviction.

North Carolina conducts extensive training programs for law enforcement personnel on the use of breath-testing equipment and the improvement of the detection and apprehension of drunk drivers. A 2-day, 16-hour course is available for law enforcement personnel for detecting and apprehending DUI violators, and for presenting evidence and testimony in court. DUI arrests in 1970 totalled 35,348; in 1976, there were 37,655 DUI arrests. The State Highway Patrol has consistently maintained a high level of DUI arrests. Special DUI enforcement units are used as circumstances dictate.

Since 1963, the Department of Human Resources (formerly the State Health Department) has been desig-

nated as the agency responsible for the Alcohol Chemical Test Program. This agency governs the selection, training, and certification of persons who administer the evidentiary tests. The agency is also responsible for the designation of equipment to be used for these tests. Though the training of personnel is performed at Community Colleges, the Director of Health Services approves the curriculum used, the details of the courses, and the qualifications of the trainees. This program has produced about 2,500 certified breath-test operators. Each year about 400 are trained to offset the 20 percent turnover that law enforcement agencies experience.

Enabling legislation was passed to permit district court judges to require PSI's of individuals convicted of DUI. The driver history file is one of the principal sources used for this type of investigation.

The Alcohol and Drug Abuse Section, Department of Human Resources, is responsible for most rehabilitation programs. At the present time, there are approximately 160 locations where programs are available to treat the various types of alcohol abusers in the State. In 1974, the State developed a rehabilitation alcohol test, evaluation, and retrieval system. This computerized system enables information on drinking drivers from various sources to be recorded, matched, analyzed, and made available to user agencies.

The North Carolina Highway Patrol initiated an information program in 1974. The State Department of Transportation had a public relations section. This program, conducted by 48 troop safety information officers, featured extensive use of community media as well as speaking engagements by officials on highway safety matters. It is estimated that about 90 percent of the State's population was reached by these announcements, and that approximately 500 presentations were made annually by officials to public, civic, school, or religious organizations.

The Department of Motor Vehicles contracted with the Highway Safety Research Center to redesign the written/oral driver licensing examination and the operator's manual. Alcohol questions which stress the risks involved in drinking and driving are made a part of the examination.

The Department of Public Instruction is presently revising the State's curriculum for Driver and Traffic Safety Education. The revision anticipates an instructional unit pertaining to alcohol education.

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# NORTH DAKOTA

Since 1970, the State's alcohol program has grown in both sophistication and responsiveness to the needs of the public.

In 1970, the State's Department of Health, Division of Alcoholism and Alcohol Abuse, initiated a public information program on alcoholism. In 1972, it established a drinker/driver education program "Counterattack" through the regional mental health centers.

The alcohol program is administered jointly by the Division of Alcoholism and Drug Abuse and the Office of Highway Safety. The Division is more concerned with public information and "Counterattack" programs while the Office of Highway Safety directs its efforts toward the courts, chemical breath-testers, chemical test operators, and working with the local and State law enforcement officials.

The relationship between the State and local traffic alcohol safety programs has had a significant impact on all localities in the alcohol program. Basic material has been distributed for use in the schools. In addition, cities and counties can acquire equipment such as chemical breath-test units. Training is provided in chemical breath-test equipment operation and maintenance for local police officers.

Financing for alcohol and traffic safety programs is provided by the State legislature, NIAAA, NIDA, Highway Safety Funds, and local communities.

The Alcoholism and Drug Abuse Division prepares a comprehensive annual plan in coordination with regional centers. In 1977, the North Dakota Combined Law Enforcement Council published a special "Plan for Action." One chapter of the report is devoted to alcoholism and drug abuse and specifically outlines the level of the problem, the laws related, survey results, treatment sources, and funding.

The Traffic Safety Program Division of the North Dakota State Highway Department collects information on the individuals who have to participate and complete the DUI "Counterattack" courses. Analyses are prepared on the number of individuals who repeated and who do not report to the courses.

All agencies attempt to maintain an ongoing communication on their mutual program efforts. Each

agency conducts its own evaluations of safety campaigns and these data are used by other agencies when applicable.

The Driver's License Division has the records response capability to transfer information immediately upon a PSI request by the court or officer. A terminal exists for this purpose in each major city and county.

The Driver's License Division now flags all DUI convictions. Information goes from the courts to the Driver's License Division. The State Driver's License Division has the authority to obtain complete information on all rehabilitative actions. An estimated 50 persons annually are denied a driver's license. However, in DUI revocations, there is a possibility an offender can obtain a restricted license. In 1976, approximately half the denials were based on alcohol dependency and prior driving convictions.

Both the initial and renewal license examinations include, on a limited basis, questions pertaining to alcohol.

The Selective Traffic Enforcement Program (STEP) effort conducted in FY 76 focused on DUI and speed detection. Eight films have been furnished by NHTSA to the Highway Patrol Academy in their training of detection, apprehension, and arrest on DUI's. Approximately 400 officers are trained annually.

In 1971, a prearrest screening law was passed allowing use of preliminary breath-test devices to determine legal intoxication level of 0.10 percent. In 1975, the screening legislation was amended to require good reason to believe the driver had been consuming alcohol before applying the screening test.

The Court Administrator's Office, which is partially funded under highway safety funds, has strengthened the management control of the local courts and conducts training programs necessary in all areas, including alcohol. Two hundred judges are trained annually.

In 1970, there were 2,661 DUI convictions. In 1976, there were 5,351 convictions; 4,716 of the convicted DUI's received PSI's. Legislation was passed in 1977 allowing the courts to refer DUI defendants to a treatment facility for rehabilitation.

The authority designed to rehabilitate persons convicted of DUI was assigned, in 1970, to the Division of

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## NORTH DAKOTA

Alcoholism and Drug Abuse approved rehabilitation centers. Assistance has been provided by NIAAA and NHTSA highway safety funds.

First DUI convictions generally result in clients being referred to the drinker driver education course, "Counterattack." In 1976, 1,384 persons were referred to local rehabilitation programs involving the regional mental health centers.

There has been an increased emphasis placed on alcohol safety education in the driver education curriculum. The NHTSA-developed "You, Alcohol and Driving," made available through the American Automobile Association, is now being used in all North Dakota high

schools. This is a 3-1/2 hour program and includes supporting visual aids.

Six institutions of higher learning now offer a 10-week driver education teacher preparation course which includes alcohol and driving information.

The responsibility for public information programs is primarily borne by the Alcoholism and Drug Abuse Division. This Division also has a full-time Director of Education who works with the Highway Safety Office on the drinking driver problem. The Driver and Traffic Safety Education Section in the Department of Public Instruction handles school information. The Driver's License Division in the Highway Department covers driver and alcohol education for the driving public.

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# OHIO

Ohio's alcohol program has evolved from the early days of equipment procurement for breath-testing into a coordinated interagency program at both the State and local levels. The Administrator, Bureau of Transportation Safety, serves as Chairman of the Program Coordination Committee which is composed of Project Directors from the following State departments: Transportation, Highway Safety, Health, Education, and the Ohio Supreme Court. This structure ensures combined inputs from diverse disciplines necessary for a systems approach to alcohol highway safety programs. This Committee has the responsibility for assisting the Governor's Representative in setting State and community highway safety objectives.

In addition to interagency coordination by the Bureau of Transportation Safety, interagency coordination within the Department of Health is effected through frequent meetings. The Division of Alcoholism, established in 1972, is responsible for the development and administration of the Statewide Alcoholism Plan. The Division has one field staff person in each of the State's 12 Health Planning Regions. Each of these Regions has its staff involved in the counseling and treatment of drinking drivers at 70 statewide countermeasure sites.

Ohio adopted the concept of postconviction intervention demonstrated by the Cincinnati ASAP, and in 1972 began developing local countermeasure programs. As already noted, there are 70 operating sites. These are based on postconviction intervention techniques funded by the offender with fees ranging from \$15 to \$125 per client. These 70 sites cover about 80 percent of the State's geographic area and handle about 65 percent of those convicted of a DWI offense.

Based upon data sampling, the preliminary results of these countermeasure programs appear encouraging. For example, the recidivism rate for offenders completing one of the countermeasure program areas is 10 percent while the recidivism rate in noncountermeasure areas is approximately 60 percent.

Since 1975, Courts have also been placing DWI offenders in a "Class V Site" program. The Class V Site programs, currently located in five cities, combine a 3-day incarceration at an alternative location, usually a dormitory. Between 5,000 and 6,000 offenders per year participate in the program. Normally, participants pay \$100 which is reduced from their usual \$200 fine.

Local participation in the Alcohol/Drug Highway Safety Program may be obtained through contacts with the Health Department's Alcohol/Drug Highway Safety Program or Division of Alcoholism staff at the 70 sites, through one of the other Departments on the Program Coordinating Committee, or through the Governor's Representative.

In 1971, Ohio lowered its presumptive BAC level from 0.15 to 0.10 percent.

Chemical breath-testing by the Police has increased greatly in Ohio. The number of chemical test operators has increased from 2,500 in 1970 to 4,800 by 1977. This expansion in testing ability resulted in an increase of DWI convictions by the courts from 24,000 in 1970 to 66,000 by 1977.

In 1972, the basic police recruit curriculum was modified to include 6 hours for officers and 10 hours for the Highway Patrol on the Techniques of Identifying the Impaired Driver and the Effect of Alcohol on the Body. As a result, DWI arrests have increased from 35,000 in 1972 to 79,000 in 1977.

There are no special DWI courts in Ohio. A DWI offense may be tried in any court of jurisdiction, i.e.: County, Municipal, or Mayor's Court.

Between 1972 and 1976 over 1,500 judges/prosecutors participated in special alcohol seminars. In addition, in 1976, the Ohio Supreme Court Judicial College added 2 hours on DWI trials to its curriculum. As a result, 70 courts are now referring convicted DWI offenders to local alcohol countermeasure programs. The DWI conviction rate has consistently improved, since the beginning of the program, from 44 percent in 1967 to 88 percent in 1976.

There has been good progress in the Traffic Education area in Ohio. Since 1972, every driver education student receives 2 hours of alcohol information. In the same year, 8 hours of alcohol information was added to the Driver Education Teacher In-service Summer Institutes. To complement the Driver Education Program, approximately 1,420,000 students in grades K-8 will receive 1 to 2 hours of alcohol education each year and approximately 722,000 students in grades 9-12 will receive 2 to 4 hours of such education per year.

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## OHIO

The alcohol public information program spearheaded by the Department of Health has expanded greatly since 1970. This effort consists of news releases and general alcohol information channeled through local safety

councils. Based upon telephone surveys conducted by the Ohio Women's Traffic Safety group, the level of public knowledge on alcohol and highway safety increased from 10 percent in 1973 to 60 percent in 1975.

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# OKLAHOMA

The major emphasis in the area of alcohol and highway safety began with the ASAP in Oklahoma City and with the formation of a special Governor's Committee (1973-1975) to identify alcohol-related problems across the state and formulate countermeasures to address these problems. Committee membership consisted of representatives of the Oklahoma Highway Safety Office (OHSO)/Governor's Highway Safety Representative, the Health Department, other State agencies, local officials, and the public. From this committee the basic organizational structure for the Oklahoma alcohol-highway safety program was established.

Today, the Health Department is responsive to the needs of the statewide alcohol problem and the Traffic Safety Office to the highway safety aspects; both agencies now coordinate their activities. Interagency coordinating at the local level is a reality, particularly among these agencies that administer the NHTSA and NIAAA grant funds.

One of the major accomplishments (1973-1975) of the Governor's Committee was the establishment of emphasis on DUI in two cities: Tulsa and Lawton. The funding of the Oklahoma City 403 Demonstration Project coincided with the State-sponsored projects in Tulsa and Lawton. In 1973 and 1975 a major portion of the State's highway safety funds were spent in alcohol-related areas. In these three metropolitan areas, extensive use of selective alcohol enforcement patrols supplemented regular patrols. Assignment was based on historical accident experience by time and day of week. Each of the three cities has made extensive use of mobile vans/laboratories to aid the selective alcohol enforcement and the routine patrols. DUI charges filed in the City of Tulsa increased from 1,100 in 1971 to 2,600 in 1976.

The qualifications of personnel and equipment for chemical tests of blood alcohol are established by a Board of Chemical Tests for Alcohol Influence. This board, composed of law enforcement and medical leaders, exercises statutory authority in the approval of "satisfactory techniques, methods, and equipment for chemical tests for alcoholic influence, ascertain the qualifications and competence of individuals to conduct such tests, and to issue permits which shall be subject to termination or revocation at the discretion of the Board."

Rules of the Board require test machine calibration every 30 days or 25 tests and recertification of operators annually. Presently, there are about 900 operators and 160 machines distributed throughout the State.

The three cities with organized programs have special courts of record and city personnel assigned to handling DUI cases. Such personnel include special judges and prosecutors. There is a PSI of driver license records and local police files to determine prior alcohol involvement and criminal activity. As an ongoing program, workshop activities are held at the local levels to involve all of the courts in the alcohol program.

On first offense DUI, certain courts exercise judicial discretion through deferred sentencing based on an individual's participation in appropriate rehabilitation activities. This deferred sentencing capability functions in conjunction with local rehabilitation activities and provides a viable supplement to the fine/imprisonment provisions of the State Code.

Under the Habitual Offender law, the Department of Public Safety may order a person, whose driving record shows two DUI offenses, to take a physical examination and/or attend a driving improvement school. A hearing is held by the Department on the seriousness of a person's drinking problem, and is used, in part, to warn the multiple offender of the consequences of continued DUI offenses. Further DUI violations following such a hearing normally result in license revocation or suspension until the individual can prove he has had control of his drinking for at least 1 full year.

There are at least 20 community DUI schools/programs which receive clients by way of the courts. These schools/programs are supported by client fee systems. Each school/program presently provides for training of its own instructors/therapists.

Within the State's recommended driver education curriculum, which covers a 90-hour semester, 5 hours are devoted to alcohol safety education. This subject is also addressed in a more generalized nature in other secondary school curricula. State support to school-based alcohol education is primarily technical assistance. The

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## OKLAHOMA

OHSO also makes available to the schools and to in-service teacher clinics audiovisual materials, breath-test demonstration equipment, or other devices appropriate to local needs.

The Driver's Manual includes paragraphs specifically related to alcohol and driving, implied consent law, mandatory revocation of license, mandatory point system, and driver improvement. The information on alcohol is the basis for at least one question on each driver's license examination.

The Highway Safety Office publishes a comprehensive monthly newsletter which highlights the alcohol problem locally and statewide, emphasizing programs to combat the problem. The Office also provides a film library including alcohol/drug material, and prepares press releases related to pertinent aspects of State and local alcohol programs. Finally, the Office cooperates with the Division of Alcoholism of the Oklahoma Department of Health and Tulsa University in the design, implementation, and evaluation of alcohol safety campaigns.

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# OREGON

The Oregon drinking driver countermeasure program was initiated in 1970 with the beginning of the NHTSA-funded ASAP in the cities of Portland and Eugene.

The Governor's Highway Safety Representative functions as the alcohol program coordinator and chief administrative officer for the Traffic Safety Commission. Membership of the Commission consists of five persons representing the public, and is responsible for the development and conduct of the State's highway safety program. The commission is responsible to the Governor. Under this arrangement the Governor's Representative has full authority to coordinate the State drinking driver program with all other State agencies.

As a result of the ASAP program in the Portland/Eugene areas, and as a result of the national information relative to the use of selective enforcement as an effective tool in combating alcohol-related traffic offenses, the State Police deploy an alcohol emphasis patrol on a continuing basis. The emphasis patrol is used, normally, on the 8:00 p.m.—4:00 a.m. shift and is titled, "The Drunk Driver Patrol."

The Oregon Traffic Safety Commission, using highway safety funds and information available from national sources, has funded a number of emphasis patrol activities, particularly in the sheriff's offices of the State. These patrols are used in exactly the same manner as the patrols of the State Police. These locally-operated emphasis patrols are also deployed, using available traffic records to identify hour-of-day, day-of-week, week-of-month peak times for high alcohol involvement locales. Emphasis on DWI by the State Police has resulted in a five-fold increase in arrest since 1970.

The State Police operate two video tape equipped patrol cars, and use tape recorders for all officers at the time of arrests. The majority of all DWI arrests are tape recorded. Approximately 17 local police agencies use video taping at the time of booking for DWI offenses.

There are legislative tools available to police for the arrest and prosecution of the alcohol-involved offender. These legislative aids are: the guilty per se at 0.10 percent law; the 0.10 percent presumptive level law; and the recodification of Oregon statutes allowing for no license suspension on first conviction of DWI.

Changes in the legal and administrative environment have direct impact on the implementation of alcohol countermeasures programs. One change was the decriminalization of some offenses, including first offense DWI. On the first offense, the court does not have to suspend the licenses and does have the option of diverting the offender into an alcohol rehabilitation program. Approximately, 50 percent of the DWI offenders are subjected to PSI's to ascertain the proper rehabilitation modality.

All courts are required to meet annually in traffic court conferences and one annual training conference. Dealing with the alcohol-related offender comprises a sizeable portion of all training sessions. In addition to the internal training program, the State court administrator sends judges to the National Judicial College of the judiciary sessions at Reno, Nevada.

The rehabilitation programs available to the Portland/Eugene ASAP include court alcohol school, driver improvement counseling project STOP, Kaiser-Permanente, and the alcohol training center. Of additional assistance to the referral-rehabilitation program is SWARF (South West Washington Alcohol Rehabilitation Foundation). Under such programs as the Kaiser-Permanente program, there is no direct relationship with the court. Referral to these programs is accomplished through ASAP screening and referral.

Client fees vary. One organization which is client fee supported charges a maximum of \$600 per individual referred to the program. The use of disulfiram is an integral part of the State's rehabilitation program.

Oregon has a recommended driver education curriculum which contains enough information for a full semester of driver education. However, most schools continue to use the traditional 30 hours of classroom instruction and 6 hours behind the wheel.

The State enhances school safety education through a number of activities. These provide a full range of materials and demonstration activities which are available to any interested instructor in the individual school districts. Films on alcohol problems such as drunk driving are available from both the State driver education office and the State Motor Vehicles Division to all driver education instructors. Under the ASAP project, a 4-hour alcohol education unit entitled "The Alcoholic Within

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## OREGON

Us'' was developed. This unit is a portion of the recommended alcohol/driver education curriculum in the State.

The State Department of Education provides ongoing in-service training in alcohol safety education as a part of its total teacher upgrading program. Alcohol education is a primary responsibility of the health education area of the Department of Education and a secondary responsibility of the driver education area. The health coordinator works actively with the safety education area to assist in the determination of the quantity and quality of alcohol safety education in the State's driver education curriculum.

In the area of public information/education, Oregon has a strong public information support from a variety of organizations. Such organizations as the American Automobile Association, Alcoholics Anonymous, Independent Insurance Agents of Oregon, Independent General Contractors, Gasoline Dealers Association, and related organizations, have made sizeable, significant products and talent available to impact on Oregon's traffic safety program. Business organizations such as major insurance companies and outdoor advertising firms have also provided continuing support to Oregon's traffic safety program through the initiation, funding, and implementation of public information/education programs throughout the State.

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# PENNSYLVANIA

The Commonwealth of Pennsylvania has made considerable progress since 1970. Coordination between State agencies has been established through the membership on the Governor's Traffic Safety Council and its operational arm, the Highway Safety Group. Coordination between State and local agencies has been enhanced by the liaison provided by the Single County Authorities established by the Governor's Council on Drug and Alcohol Abuse. Also, a successful Philadelphia alcohol safety project has developed management approaches and tested countermeasures that have been implemented elsewhere in the State.

The Governor's Representative, as Chairman of the Governor's Traffic Safety Council, has broad authority to coordinate the Commonwealth Alcohol Safety Program. The membership of the Council includes the combined functional authority necessary for a systems approach.

The Philadelphia Alcohol Program, acting as a technical resource to the Highway Safety Group, has developed materials for Standardized Safety School Curriculum, Accelerated Rehabilitative Disposition (ARD) and, most recently, a structured public information program susceptible of impact evaluation.

The Highway Safety Group is encouraging communities to develop multiple-agency alcohol programs wherever possible. As a normal minimum program, improved law enforcement measures, definitive court processes, and an alcohol safety school are developed.

Pennsylvania State Police have general law enforcement responsibilities. The State Police has equipped each barracks with breath-testing equipment and assigned certified testing personnel.

This coverage is reported to provide access to testing within 20 minutes after arrest to 80 percent of the State. Training, retraining, and certification of breath-testing equipment operators from local police departments, as well as State police, are provided at State police academies.

An expanded program to provide breath-testing devices and to expand the availability of certified courses for breath-test operators in Municipal Police Departments is being initiated through highway safety funding.

In 1971, a special Court Rule was initiated that permits case disposition without conviction upon successful completion of a specified probation and therapy. Adopted initially as a humane method for marijuana case disposition, the Rule was tried in Philadelphia for first-time DWI offenders. The term "accelerated rehabilitative disposition (ARD)" is used to describe the process established.

Under ARD, an offender petitions the Court of Common Pleas, through the prosecutor, for this disposition. Upon acceptance by the Court, the offender forfeits the right to speedy trial and enters a program prescribed by the Court. This individualized program is customarily based on a background examination employing standardized techniques. Upon successful completion of the program, the case is then dismissed by the Court without determination of guilt.

Since July 1, 1977, notification of ARD acceptance is transmitted to the Bureau of Traffic Safety for Driver History record purposes. Previously, no notification was required and the only record was that kept by the county prosecutor. For purposes of licensing sanctions, acceptance of ARD for DWI is now considered a first offense.

Under the coordination auspices of the Highway Safety Group, the Governor's Council on Drug and Alcohol Abuse and the City of Philadelphia Alcohol Safety Program, standardized Alcohol Safety Instructor's Guides have been developed and given statewide distribution. The Guides capitalize on the experience of the successful Philadelphia program initiated with highway safety funding and continuing on a self-supporting basis. The Guides are intended to establish a minimum instruction quality for alcohol safe-driving schools and for the rehabilitation of persons with deeper alcohol problems.

Training of rehabilitation treatment personnel to assist the rehabilitation of problem-drinker drivers is one of the State's priority training programs.

One method of increasing public awareness of the problems of drinking and driving has been the use of the SOBER program which started in 1973. The program

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## PENNSYLVANIA

has achieved statewide recognition through its use of information and educational materials, pamphlets, exhibits, posters, bumper stickers, and numerous radio and television spots.

Alcohol-related subject material presently constitutes about 20 percent of the standard curriculum in Driver Education. Through minimum licensing age inducements, about 80 percent of the eligible students complete the 30-hour classroom phase and 67 percent the combined classroom and practice driving programs.

In November 1972, the City of Philadelphia, in conjunction with the alcohol program of the West Philadelphia Community Mental Health Consortium and the National Council on Alcoholism, established an alcohol highway safety program. The City of Philadelphia project worked with the Highway Safety Group for the initiation of the program using 402 highway safety monies as startup funds.

Probably one of the most important goals of the Commonwealth has been to get the court systems to use their significant powers to get substance abusers into appropriate treatment programs. Since 1972, over 12,000 persons have been referred by the court to the Philadelphia program. The District Attorney's Office screens all arrests for DWI and selects those persons who might

benefit. While this method of selection allows a substantial number of people to enter the program and then into treatment, it also helps with the elimination of the huge court backlog and allows the courts to spend more time on violent and hardcore offenders.

The Governor's Traffic Safety Council has encouraged the development of a curriculum designed for use in DWI schools throughout the Commonwealth, and the curriculum developed is being used as the basis for the program throughout the State. A new Motor Vehicle Code, effective July 1, 1977, authorized Pennsylvania DOT and the Governor's Council to establish and maintain driver improvement schools throughout the Commonwealth. The International Alcohol and Mental Health Associates Inc. is expanding the curriculum and developing manuals which will be used in all alcohol-highway safety programs. Twenty-seven counties in Pennsylvania have already started programs—Philadelphia, Bucks, Delaware, Montgomery, and Chester Counties are among these. Every county will be required under the Vehicle Code to have an alcohol highway safety education program for those arrested for DUI. Startup funds are available through the Governor's Traffic Safety Council. The projects are expected to continue on a self-supporting basis through collection of costs from clients.

# PUERTO RICO

Many changes have occurred in the alcohol safety program in Puerto Rico since 1970. Most of these changes are a result of the federally-funded ASAP which was implemented islandwide by the Puerto Rico Traffic Safety Commission (PRTSC).

During the ASAP operational phase (1972-1975), the ASAP management recognized a need for new legislation to achieve the ASAP's objectives. In 1973, three laws were passed. Act 59 requires a PSI of all convicted DWI offenders. Act 58 eliminates urinalysis as a chemical testing method to determine BAC, paving the way for a breath-testing program. And, Act 60 created the Department of Addiction Services to provide rehabilitative services to problem-drinker drivers identified by the courts.

Puerto Rico has included alcohol information in its Driver's Manual since 1960 and has used questions from this information on its Driver License written examination. Following the 1973 and 1975 changes, the manuals and examinations were amended accordingly.

A 37-man special alcohol patrol unit activity was the first countermeasure to be implemented in 1972. At the termination of the ASAP Project, 15 such units were operating and were absorbed into a special alcohol unit of the Puerto Rico Police. A 1976 Police reorganization resulted in these units losing their unique identity. This action, however, has not reduced the DWI arrest level. Prior to 1970, DWI arrests averaged 1,300 annually. During the ASAP special effort, the average was increased to 9,500. In 1976, after ASAP and following reorganization, the number arrested still exceeds 9,000 annually. The following table shows the arrests for 1972, 1973 and 1976.

	1972	1973	1976
DWI Arrests	2,000	4,877	9,166
% Convicted	68%	64%	72%
# Referred to Rehabilitation	—	191	1,032
# Completing Rehabilitation	—	-0-	615

To reduce the high incidence of pedestrian fatalities, the Puerto Rico ASAP also had special Pedestrian Patrol Units in its countermeasure program. Special training, similar to that given to the ASAP Patrolmen, was given to the five patrolmen selected for these pedestrian patrols. This special patrol drew awareness of other policemen to the intoxicated pedestrian and in-

creased the DWI arrests accordingly. Following ASAP, the PRTSC expanded this pedestrian program by the addition of four additional pedestrian patrol units.

The training of the ASAP patrolmen consisted of a 1-week course (40-hours) covering: traffic laws pertaining to DWI, identification and apprehension of drunken drivers, alcohol and the human body, chemical testing and reporting, and court testimony. The Department of Health certified police officers as chemical breath-test equipment operators.

Although available since 1960, breath-testing to determine intoxication had not been implemented or facilities developed prior to ASAP. Act #58 (1973) provided for this modernization.

The Department of Health established procedures for the testing of ampoules and preparation of simulator solutions by the Department of Health's chemists. The Department also provided for the training and certification of breath-test operators and participated in the selection and certification of equipment.

Under Act #59 (1973), PSI of all convicted DWI offenders was established in order to determine the extent of their drinking problem. A probation officer conducts the investigation and submits a report with recommendations to the judge prior to sentencing. The Mortimer-Filkins diagnostic questionnaire and criminal record check have been used since November 1975 to assist in this determination.

Based on the report and recommendations, the judge determines whether the person is a problem or social drinker. Problem drinkers are referred to rehabilitation treatment at the Department of Addiction Services. Social drinkers are referred to the DWI Driver Improvement Course offered by the Bureau of Motor Vehicles. By law, a judge may suspend the penalties imposed on certain first offenders who agree to treatment. The judge may dismiss the case and order license restoration to first offenders who successfully complete the treatment.

The Department of Addiction Services created by Act #60 (1973) is responsible for offering rehabilitation treatment to convicted DWI offenders that have been classified as problem drinkers and referred to the Department by the courts. At the present time, all problem

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## PUERTO RICO

drinkers receive the same treatment. The Department, however, feels that problem drinkers can be classified by the severity of the problem and short term rehabilitation may be offered to those with light to moderate problems.

The most significant activity in the education field is the implementation of alcohol curriculum materials for grades K-12 in the Island's public schools using NHTSA-developed materials. Due to problems identified by the youthful involvement in alcohol related accidents, the development of the grades 10-12 curriculum has received priority attention.

Approximately 150 persons have been trained to teach this course. The course was pilot tested in February and March of 1977 in eight schools (787 students). It is expected that the alcohol and traffic safety course will become a part of the regular curriculum for 65 percent of the Island's schools.

A mass media campaign has been directed at the general public. The campaign, dependent on public service time, relied on national campaign materials in the beginning. Radio broadcasting of the national spots has continued and national ASAP campaign TV spots were shown in both English and Spanish.

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# RHODE ISLAND

The impetus for the institution of the statewide alcohol safety program initially came from the Automobile Club of Rhode Island.

Since 1976, a full-time Youth and Alcohol Coordinator's position has been funded with highway safety funds approved by the Governor's Highway Safety Office. The main function of the position is to coordinate the functions of the District Court, Rhode Island Junior College, and the Family Service Society as they pertain to the drinking driver. In carrying out this responsibility, the coordinator works closely with the Department of Health, Registry of Motor Vehicles and the State and local police departments.

The State organized a statewide enforcement program in 1976. A total of 356 police officers have completed the 80-hour course in chemical breath-test operations at the University of Rhode Island. All police recruits receive a 2-hour session in detection, apprehension, and prosecution of DWI law offenders. In addition, basic and advanced training courses, in the subject area, are available for all police officers.

For a first DWI conviction, the offender is usually sent to a DWI school and assessed a \$100 fine. On a second offense, the individual is not allowed to repeat the course, but at the discretion of the judge is either fined, has his license suspended, is placed on probation, or may be jailed.

Individuals sent to DWI schools must complete a 10-hour course. All DWI offenders are subject to PSI's by alcohol rehabilitation coordinators. Approximately 26 percent of those screened are referred to treatment agencies for rehabilitation. In addition, a manual record system is available in both the Registry of Motor Vehicles and the Administrative Adjudication Division to track the DWI clients. Finally, upon completion of the course, the alcohol counselor submits his report to the Youth and Alcohol Coordinator who forwards a copy to the appropriate district court for final sentencing or further case disposition. Since 1974, 1,657 DWI individuals have entered and completed the Alcohol Safety School.

The main rehabilitation treatment agency in Rhode Island's program is the Family Service Society of Pawtucket, Rhode Island. The State also refers DWI offend-

ers to 35 other rehabilitation agencies throughout the State.

Rhode Island has had an implied consent law and a statute setting the legal maximum blood alcohol content at 0.10 percent since 1963. Until 1974 legislation, a conviction for DWI carried a mandatory 1-year revocation of the driver license. Refusal to take a BAC test after arrest still carries a penalty of 6 months driver license suspension.

During this period (pre-1974), the major emphasis on Drunk Driver Control was the successive improvements in law enforcement techniques. The Department of Health and Welfare had been established as the cognizant agency to establish standards for breath-testing procedures, equipment acceptance, and operator certification. Through the facilities of the University of Rhode Island, an 80-hour course in testing procedures was conducted for Municipal and State Police personnel. Additional training courses dealing with detecting DWI's were developed at both the State Police Academy and at the Municipal Police Officers Association training facility.

Prior to 1974, the Rhode Island Motor Vehicles Laws provided that any person found guilty of driving while under the influence of liquor or drugs was deemed guilty of a misdemeanor. Under this provision conviction for DWI required 1 year's driver license revocation plus punishment for the misdemeanor (which was a fine or imprisonment). In 1974, the Motor Vehicle Laws were amended to no longer require the driver license revocation for driving while under the influence of liquor. This amendment also provided that any person convicted of DWI, in addition to or in substitution for the misdemeanor penalty, "may be sentenced to attend a special course on driving while intoxicated operated under the jurisdiction of a college or university accredited by the State." Additionally, "the imposition of any further punishment shall be deferred until the completion of the course" or the failure to complete the course. The funding for the course was anticipated by the imposition of a fee not to exceed \$25 levied on the guilty offender.

The 1974 amendment also provided for the Court to keep a full record of each case and to transmit an abstract of the record to the Registry of Motor Vehicles. This action ensures that the record of the case and the

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## RHODE ISLAND

completion of the course is available for entry into the Registry's history of each driver. The record on the history provides the Registry the opportunity to take additional action when warranted, under the State's Habitual Offender Law.

The prescribed course has been established at the Warwick campus of the Rhode Island Junior College. The American Automobile Association took an active role in providing training for the instructors and counselors and used the AAA's DWI Counterattack as an instructional model. The Amendment was signed in late March and the first DWI class at Rhode Island Junior College met on July 1. The single central site was chosen to provide reasonable access to the State's total population.

The unique feature of this course is the ready access of counselors competent to initiate therapy for those participants with greater degrees of alcohol abuse problems. Information indicates about a third of the participants have an abuse problem. As a part of the DWI school curriculum, these persons are made aware of the therapy facilities appropriate to their individual needs.

For the first year of operation the AAA operated the school. It soon became apparent that within the State

government a coordinating position was required to ensure proper communication between the affected agencies—police, courts, registry, and school. This coordination was established in July 1975 when the position "Youth and Alcohol Coordinator" was added to the staff of the Governor's Representative for Highway Safety.

The DWI school in Rhode Island is a presentence experience for the guilty offender so remanded by the court. Final determination of fine or imprisonment is made after the offender's record of school attendance or refusal to attend is reported to the court. From its start a total of 1,657 persons have been assigned and completed the school. Records in the State are not available to provide the total number of other dispositions of DWI convictions.

Until 1977, there was minimal drug and alcohol safety coverage in secondary school driver education. In 1977, 4 to 6 hours of drug and alcohol safety material was incorporated into the 30-hour course. During 1976, the State made it mandatory that teachers attend a 1-day drug and alcohol safety workshop. At the present time, a new workshop on alcohol safety is being developed.

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# SOUTH CAROLINA

Prior to 1969, revenues generated by alcohol beverage taxes were available only for general education purposes. Drunk driving was unlawful but no specific definition of this offense was contained in the statutes. Sentencing authority of the mayors' and magistrate's courts did not provide for any rehabilitative disposition of convicted first offenders.

The State Law Enforcement Division (SLED) was empowered in 1969 to implement, supervise, and regulate the breath-testing necessary for the enforcement of the State's implied consent law. The regulations that were established required the certification of all breath-test operators and recertification at two intervals. Breath-testing devices are located throughout the State in accordance with geography, population distribution, and local capabilities. This coverage entails over 200 devices with at least one located in each law enforcement organization with trained operators. Since the beginning of the program, about 800 officers have been trained and certified.

The 1969 General Assembly enacted a special 35 cents per case tax for the express purpose of establishing State facilities for a comprehensive alcohol abuse program. The State program, in addition to sponsoring county-site therapy, also included a strong public information program.

In 1971, the Governor designated the South Carolina Commission on Alcohol and Drug Abuse (CADA) as the single authority for alcohol and drug abuse prevention and control. Also in 1971, the Commission became the contractor for a federally-funded ASAP in Richland County (Columbia).

In 1973, an amendment to the South Carolina liquor law permitted clubs and restaurants to serve drinks in minibottles. Part of the tax money obtained from the sale of minibottles was to be used to establish county substance abuse programs. Also in 1973, monies that had accumulated in the State's uninsured motorist fund were provided for the expansion of the State's alcohol safety program. The first expansion was established in late 1973. Eight more county programs were established in 1974 providing service to over 50 percent of the State's population. By May 1975, complete State coverage was achieved.

At present, the State alcohol safety program operates through 31 local programs. Twenty-one programs are within a single county with the other ten in multicounty areas. All are a part of a local substance abuse agency. Each agency is under contract with the South Carolina Commission on Alcohol and Drug Abuse. Funding is derived from State and local sources, from rehabilitation client fees, and highway safety funds.

The Provisional Driver's License Act passed by the 1975 General Assembly affords a major change that expands the potential of the alcohol safety program. With this law, the opportunity for a convicted first offender to receive safety program benefits is no longer subject to the approval of the arresting officer or local judge. The Act provides that any convicted first offender whose license is not presently suspended may apply to the Motor Vehicle Division for a provisional driver's license provided: that the person enrolls in an alcohol safety school; shows proof of financial responsibility; and pays the prescribed provisional driver's license fee. The Motor Vehicle Division is responsible for granting or denying such applications. Appeal to the courts is available in the instances of denial.

The provisional driver's license is valid for a 6-month term. Within that term the holder is required to successfully complete, within 75 days, an alcohol traffic safety school certified by the South Carolina Commission on Alcohol and Drug Abuse. A fee of not to exceed \$25.00 is assessed the applicant. Failure to complete the course results in the revocation of the provisional license and the imposition of the statutory suspension. The provisional license can also be revoked for an additional drunk driving conviction or accumulated other moving violations. The provisional driver's license opportunity is extended to South Carolina licensed drivers in the event the license is revoked by a conviction outside the State.

The provisional driver's license act was enacted as a trial statute. A committee was prescribed in the act to review, with the licensing agency and the Commission, the impact of the provisional license.

In 1970, when applications for Federally funded ASAP contracts were being solicited, the CADA saw ASAP as an opportunity that might expand the South Carolina program. Since an arrest for DUI was recognized by CADA as an important indicator of an existing

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## SOUTH CAROLINA

or developing personal alcohol problem it was hoped that ASAP would broaden the means by which persons with a problem could be identified, confronted and offered early stage correction. A major interest of CADA in ASAP was the possibility of developing an intervention model for statewide application. The expansion of alcohol safety projects since the completion of the operational phases of the ASAP contract is evidence of CADA's continuing program.

CADA manages the statewide alcohol safety program with three professionals and one secretary. This staff plans and evaluates the statewide program and also negotiates and supervises contracts with county service providers, disburses State funds, coordinates and supervises the certification of Alcohol Traffic School instructors and trainees, develops projects at new sites and provides legislative liaison. Funding for alcohol safety administration is provided by the South Carolina Highway Safety Program.

Another significant contribution of the Governor's Highway Safety Program was the project that provided funding for Prosecutorial Aides. These Aides, under the sponsorship and training of the South Carolina Attorney General, provided trained legal prosecution of DUI cases upon request of the arresting law enforcement agency. During 1974-1976, 200 attorneys were trained as a reservoir available for case assignment by the Attorney General.

In addition to its program organization and management functions, CADA has employed the highway

safety funds in a statewide alcohol information program. A major example of the Information and Education program during 1975 was the use of a mobile van equipped with breath-testing equipment to give demonstrations at public affairs through the State. These demonstrations and data from related drinking driver surveys were used extensively during 1975 to inform the public about the Provisional Driver's License Law.

The 1977 South Carolina Driver's Handbook was expanded to include a discussion of the Provisional Driver's License Law and the effects of alcohol on driving. The format was changed and the coverage of alcohol and drugs was modified to supply explanatory as well as regulatory material. Three commonly-stated myths about alcohol are refuted in the new handbook and alternatives to driving after drinking are offered.

A working committee from the State Department of Education, CADA, and representatives of local school districts and county alcohol and drug abuse commissions provide assistance to schools desiring to increase alcohol education competency.

In 1974, a State law was passed requiring SLED to determine the presence and percentage of alcohol or drugs in the bodies of drivers and pedestrians who die within 4 hours of a traffic accident. Available results indicate a decline in the percentages of persons with a BAC above 0.10 percent. In 1974, 64.4 percent of the tested drivers and pedestrians registered above 0.10 percent. This figure dropped to 50.4 percent in the 1976 data taken to mid-year.

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# SOUTH DAKOTA

The Governor's Representative for Highway Safety provides leadership to the alcohol traffic safety program through the allocation of highway safety funds for the continuation of the formerly federally-funded State ASAP.

Currently, as during the operational ASAP period, the main thrust of the Governor's Representative's staff is toward the coordination of existing State resources. This coordination is strengthened and supplemented where necessary with monies for additional manpower and equipment.

The overall evaluation of the South Dakota ASAP indicated a positive impact on statewide total injury and property damage crashes and weekend injury crashes. Cost analysis of the South Dakota ASAP indicated a substantial saving to society as a result of the project.

For a number of years driver history information has been available to the courts from the licensing division. The driver license manual includes a substantial amount of information concerning drinking and driving. Also, the driver license written examinations contain a number of questions concerning alcohol and driving.

A problem in the State concerning law enforcement activity was the distance from the point of apprehension to a facility where a blood sample could be taken. To counter this problem chemical breath-testers are now in use throughout the State to supplement blood testing.

The State has been emphasizing the training of law enforcement officers in the art of detection, apprehension, and testing of the alcohol-impaired driver. Training occurs in a variety of ways. The International Association of Chiefs of Police (IACP), for example, contracted with the State to provide training for the officers. At the present time, the State provides this training which includes a strong alcohol education program and is given to all law enforcement officers attending the State enforcement officers training academy.

The most significant change in the judiciary has been the acceptance of rehabilitation procedures as an alter-

native sentence. The courts, as a whole, have accepted the presentence information and used rehabilitation programs to a large extent. Another important development has been the start of a statewide court management information system. This will provide additional integrated information to the court concerning each DUI offender.

There has been an increase in client flow generated by the ASAP. As a result of this increased activity and of alcoholism activity in general, licensing procedures have been instituted by the Department of Health. Now, all alcoholism counselors must be certified.

Currently, every student in high school driver education receives a minimum of 4 and up to 8 hours of classroom instruction specifically centered on the combination of drinking behavior with driving behavior.

Each summer, as part of their in-service teacher training, driver education workshops varying in length from 40 to 80 hours are held. A very significant portion of these workshops is devoted to the subject of alcohol and driving safety programs. Typical programs include alcohol information, particularly at the junior high and high school level.

In the South Dakota Department of Public Safety there exists a separate public information office whose primary duty is to inform the public about driving-related topics. This office is not staffed at a level which allows it to develop new materials; rather, it attempts to disseminate proven materials obtained from other sources. Such dissemination includes the distribution of DOT-produced materials throughout the State on a continuing basis. This emphasis is greater than was existent prior to the statewide ASAP program.

During the course of the South Dakota Federal-funded ASAP program, it is estimated that approximately 80 percent of the State's population was covered to some extent by the various countermeasure activities available. Since that time, this coverage has been reduced. At present, approximately 50 percent of the population is covered by at least one countermeasure activity.

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# TENNESSEE

The Tennessee drinking driver control program is coordinated by the Governor's Highway Safety Planning Division of the Office of Urban and Federal Affairs. This Division is responsible for all programs which are funded by the Highway Safety Act of 1966. The Division serves in an advisory and consultative role to other State agencies and interacts directly with four major cities and with other cities and counties through nine Highway Safety Development District Planners.

In 1972, the alcohol safety problem became an area of concern to officials in the City of Memphis. Memphis and Shelby County agencies began an alcohol traffic safety project initially financed by the Governor's Highway Safety Program with highway safety funds. The Memphis-Shelby County alcohol safety project served as a model for other efforts across the State. In 1973-75, local officials in all nine regions of the State, recognizing the importance of the Memphis-Shelby County project, activated "partial programs" (programs employing some but not all of the components of this project).

In 1976, the "systems" concept was proposed by the Governor's Highway Safety Program. The elements of the Alcohol Countermeasures System were identified as Law Enforcement, Adjudication, Rehabilitation, and Coordination.

In 1977, the State legislature enacted a new court reorganization law which placed DWI offenses entirely in the State courts. These courts will provide much greater flexibility in the disposition of convicted DWI offenders than had existed in the city courts where such cases had been tried. This is in keeping with a 1974 law that allows the court to place first-time DWI offenders on probation for 1 year instead of the usual traditional punishments.

All metropolitan cities in the State have increased their DWI arrests through intensified enforcement. For example, since 1972 Memphis has increased its DWI arrest rate 600 percent to more than 6,000 a year; the use of eight mobile testing vans has reduced the arresting officer's down time from 4 hours to 1-½ hours. In the City of Nashville, the DWI arrest rate has increased from 76 per month in 1971 to 731 in 1976, and in Metropolitan Nashville, DWI arrests in 1977 were exceeding 1,000 per month.

Tennessee has found it advantageous to train every police officer who has traffic duties on the detection, apprehension, and arrest of DWI offenders. Presently, the training is conducted by the Tennessee Law Enforcement Training Academy and by the four major metropolitan areas' city academies (Nashville, Memphis, Knoxville, and Chattanooga). Approximately 6 hours are used to cover this training.

There are 120 chemical breath-testing units located in sheriffs' offices, municipal police stations, and Highway Patrol substations. The Tennessee Chief Medical Examiner conducts approximately 68 percent of the training for local breath-testing equipment operators.

In the judicial area, five circuit courts (in 18 of the State's 95 counties) use DWI special prosecutors. The presence of the special prosecutor in the lower courts has increased conviction rates by providing the necessary legal expertise in presenting the State's case, and eliminating the need for the arresting officer to serve as both witness and prosecutor. The special prosecutor, through cooperation with local law enforcement agencies, can conduct training sessions aimed at increasing police officers' efficiency in dealing with all aspects of the DWI offense. Also important is the fact that the prosecutor serves to improve the morale of police officers.

The rehabilitation component provides two principal types of constructive or nonpunitive supplements to traditional sanctions. For a first DWI offense, social and early problem drinkers may be referred to DWI schools which are managed by the Mental Health authorities. The schools operate in 11 areas covering the entire State and are self-supporting; the fee cost is no more than \$50. DWI schools processed 6,000 persons in 1975 and 8,000 in 1976.

For the problem drinker or alcoholic, a much more comprehensive treatment program is available. Mental health centers are the agencies most frequently used. These centers are regionally located and are also under the management of the Department of Mental Health. In addition, detoxification centers, halfway houses, psychiatric hospitals, and Alcoholics Anonymous are used.

The public information program is conducted through the Highway Safety Planning Division. Approximately,

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## TENNESSEE

\$20,000 to \$30,000 of Federal highway safety funds are spent annually on this effort. Some of the major efforts in this area have been: press releases during holidays; a

display at the State fair; a statewide alcohol safety conference; cards and pamphlets for distribution; and an alcohol safety week poster contest.

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# TEXAS

The Office of Traffic Safety (OTS) is the agency that has been the focal point of traffic safety related alcohol programs. The Commission on Alcoholism is responsible for establishing coordination of alcoholism programs, the establishment of rehabilitation programs, and the conduct of educational activities. The Department of Public Safety through its Driver License and Law Enforcement agencies has had specific alcohol-related responsibilities. The Medical Advisory Board provides guidance in alcohol policy issues and also provides recommendations on the licensing of drivers with a variety of medical infirmities. The Texas Education Agency provides management and coordination of the education program on alcohol throughout the public school system. Though not organized under central management, the Courts play an authoritative role in determining which persons convicted of DUI may retain their driver's license and the extent to which these persons' driving is restricted.

In developing local safety programs OTS applied local-benefit highway safety funds to portions of community-comprehensive efforts rather than isolated spot improvements. This strategy, begun in 1973, has improved coordination between local and State agencies with similar alcohol safety related responsibilities. In a number of communities, nongovernmental organizations have become active in support of alcohol safety related efforts.

An important change in the law was the passage of "presumptive limit" legislation (1971) establishing the presumption of intoxication at a blood alcohol content of 0.10 percent. This enactment greatly enhanced prosecution of DUI cases and also provided a definite basis for describing intoxication in educational literature.

The Texas Drivers Handbook contains both informative and regulatory information on drinking and driving. The Handbook is revised biennially to incorporate new information and changes in the laws and regulations. The Department's Driver Improvement program has established procedures in conjunction with the Courts to refer problem drinkers to appropriate rehabilitation. A recent report indicates that 75 percent of the referred persons complete the prescribed sessions.

The Department of Public Safety and the Department of Health jointly administer the Medical Advisory Board. The Board, active since 1970, provides service

through review of individual cases of medical impairment and also has published and promulgated a "Physicians Guide for Determining Driver Limitation." In 1975, the Board considered 15,908 cases and made recommendations that resulted in 3,183 driver license denials for a variety of infirmities. The "Physicians Guide" is an attempt to increase the voluntary recognition of driving limitations by the physicians in private practice.

Increasing the availability of breath-testing equipment and the qualification training of necessary operators have been two of the steps taken to increase the detection of drunk driving violators.

The Texas Department of Public Safety is responsible for the calibration, usage procedures, and acceptability certification of breath-testing devices. Additionally, the Department provides training and certification of breath-test operators for local as well as State enforcement agencies. The number of persons tested increased from 57,500 in 1971 to 70,600 in 1973. In the following 3 years (1974-76) the number tested was 68,000, 71,491, and 69,770.

Progress in judicial disposition of DUI cases has been focused on providing training and materials for judges. Since Texas is one of the States where the judges can order a special driver's license for a person convicted of DUI, the OTS is taking these steps to assure that judges are aware of both the serious nature of the DUI offense and the opportunities available to treat the offender who is a problem drinker. In many instances, improvements accomplished through the federally-funded ASAP projects have been continued.

In the rehabilitation of DUI offenders, programs have been established in cities and county agencies to provide education, counseling, and rehabilitation. These programs are sponsored and operated by a variety of agencies which work closely with court and probation officials.

The Texas Education Agency prescribes a minimum of 3 hours of alcohol safety instruction in the secondary school driver education curriculum. Approximately 165,000 students receive this course annually. Alcohol safety units have been developed and are encouraged for other courses.

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## TEXAS

Extensive media campaigns have been developed that incorporate material for newspapers as well as radio and

TV broadcasting. OTS coordinates materials prepared in various State agencies for distribution to these outlets.

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# UTAH

The Governor's Representative for Highway Safety acts as the coordinating agency for alcohol safety action programs in the State.

The Commission on Alcoholism and Drug Abuse provides support to the alcohol safety program in the areas of counseling and rehabilitation. Support, in the form of counseling services, is provided by the Mental Health Services, the University of Utah Mental Health Division, the Veterans Administration Hospital, and local mental health units.

The Governor's Representative for Highway Safety is responsible for all alcohol traffic safety public information programs and coordinating the programs with other State agencies. The Governor's Representative also provides technical training for State and local government staffs engaged in alcohol countermeasure activities.

The Governor's Representative receives community applications for funding of projects dealing with the drinking driver. Once an application is approved and implemented by the community, the Governor's Representative's staff provides technical guidance and assistance in developing countermeasures.

The basic funding source for local alcohol related highway safety activities are the Federal highway safety funds made available through the Governor's Representative for Highway Safety. In addition, local government, NIAAA, and LEAA funds have been channeled into DUI projects.

Within the State of Utah, the availability of the driver history data has existed for many years. However, because of increased court referral and the DUI tracking system, driver history data is being used more frequently.

A separate supplement to the driver license manual was developed dealing with the risks of alcohol and driving. In 1977, this supplement became a part of the driver license manual and questions relating to alcohol are now part of the examination given applicants for driver licenses.

To increase the driving public's knowledge of the risk of drinking and driving, "Know your limit" cards were disseminated to the general public and the driver license applicants. Fliers, posters, and public information doc-

uments were distributed as part of the "Know Your Limit" campaign.

Audio tape recorders were purchased and used by specialized ASAP enforcement patrols. Chemical breath-testers were purchased for all police departments involved in the ASAP program and some were purchased with Federal highway safety funds. Preliminary breath screening devices were also procured for use by the Highway Patrol to determine their effectiveness.

Since 1971, six training sessions for selective enforcement patrols have been conducted dealing with the strategies and techniques involved in the detection of DUI's. The number of DUI arrests has increased from 2,559 in 1970 to 5,181 in 1976.

An important change in the adjudication process dealing with those convicted of DUI is the availability of a PSI. As an alternative to jail sentences and fines, a sentencing process is now available which provides for referral to counseling, DUI schools, group therapy, and other rehabilitative resources.

In the ASAP information system, the driver history records were made more readily available to the courts and used in PSI's. As a result, the court now has a much greater knowledge for dealing with the convicted DUI offender because of the coordinated system established between the arresting officers, prosecuting attorneys, and the courts.

The court system is coordinated by the State Supreme Court. In areas where the Justice of the Peace (JP) system is very active, the Governor's Representative has coordinated training and briefing sessions for the JP's and municipal court judges so they have a better understanding of the drinking driver problem and the role that they can play in dealing with the problem-drinker driver.

Because of ASAP, a juvenile court program has been active since 1975. This program relates primarily to drivers between the ages of 14 and 18 who are arrested for DUI. Youths convicted by the juvenile court attend drinking-and-driving schools with their parents. The youths in the treatment group had a 13 percent alcohol offense rearrest rate, while the control group had a 29 percent rearrest rate.

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## UTAH

The DUI client tracking system developed by ASAP continues to be used by many of the rehabilitation agencies. In the early 1970's, the only DUI clients referred to a rehabilitation program were those in Provo, Utah. The number of referrals in the State has increased from about 100 in 1970 to approximately 2,000 in 1976.

Each year there is a training session for secondary school driver education teachers and the subject of alcohol and driving is discussed on a priority basis. New curriculums are presented and the teachers are given an

opportunity to discuss, in detail, all aspects of a drinking/driving program.

With the advent of the ASAP program, a public information and education countermeasures program was implemented. The program was statewide and was emphasized within the Wasatch Front where approximately 80 percent of the population lives. This program was multifaceted, using all elements of the media with particular emphasis on the newspaper, radio, and television coverage.

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# VERMONT

Vermont has become heavily involved in the alcohol safety program since 1970. The program has expanded from a six-county 100 percent federally-funded ASAP to a statewide program with the major share of funding provided by the State. The program is administered by the Alcohol and Drug Abuse Division of the Vermont Human Services Division.

The ASAP helped to bring about substantial changes in DWI laws that resulted in improving the alcohol safety program. In 1973, the legislature:

- passed an Illegal Per Se Law;
- established breath-testing as the approved method of determining BAC;
- offered the DWI offender a reduced license suspension term if an alcohol rehabilitation program was successfully completed;
- mandated alcohol education courses statewide for DWI offenders; and
- required the BAC determination from drivers surviving a fatal crash.

Since the initiation of the ASAP, DWI arrest processing techniques have improved. Video tapes of arrest and BAC testing in mobile vans were used to gain public awareness and improve officer competence. The gas chromatograph method of BAC testing was adopted. About 500 officers were trained in the use of the breath-test equipment. Extensive on-the-job enforcement training has been conducted using teaching teams from the State and local police. This technique resulted in improved interagency cooperation and rapport in detecting and arresting drunk drivers. As a result of these efforts, DWI arrests have increased from 643 in 1970 to 2,784 in 1977.

The 1973 DWI laws have led to 100 percent availability of convicted DWI offenders in the rehabilitation education schools. PSI's are performed during the school process by a case manager who has access to driver history files on special request of the judge only. He also is responsible for running the school, reviewing each DWI case at an individual followup session, conducting group leader training, and conducting personal counseling.

The number of DWI driver education schools has grown from 15 schools in 2 locations with 350 students in FY 1972, to 100 schools in 13 locations with 1,800 students in 1977. The rehabilitation program is supported by client fees (\$50 per client) and is augmented with State funds.

As part of this program, license renewals after suspensions are now permitted only after completion of the Crash Education School and at the discretion of the Commissioner of Motor Vehicles.

The Driver Education Course in the secondary schools has been upgraded by the distribution addition of a 30-page contemporary brochure which focuses on youthful uses of material developed by the ASAP project and the Department of Education. From 3 to 5 hours of the high school course are devoted to the alcohol safety education. Driver Education teacher recertification requires approximately 6 hours of alcohol education out of 90 hours required preparation. Teacher requirements will be raised.

In the public information and education area, each radio and TV station and drive-in theater carries alcohol safety promotional materials developed by the ASAP project and NHTSA.

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# VIRGINIA

There has been significant alcohol safety program progress in the State since 1970. The Fairfax County ASAP, operational from 1971-76, provided experience instrumental in the passage of legislation for state-wide expansion of comprehensive alcohol safety action projects.

The Virginia Alcohol Safety Action Program (VASAP) officially became effective upon the approval of House bill 1662 on March 24, 1975. Passage of the bill placed program management and coordination with the Highway Safety Division (Governor's Representative for Highway Safety).

Under the direction of the Highway Safety Division (HSD), the VASAP office has a full-time Alcohol Safety Administrator, Manager, Evaluator, Assistant Evaluator, Information Officer, and Information Technician. In addition, the 10 Highway Safety Coordinators of the HSD contribute to the planning, coordination, and operational phases of the VASAP.

A major effort on the part of the VASAP office is the development of training programs for the many agencies connected with the local programs. Workshops, seminars, conferences, and/or training courses have been conducted through the Commonwealth for the local VASAP directors, case managers, public information specialists, District Court judges, Circuit Court judges, Commonwealth attorneys, and police administrators and instructors.

The State VASAP Office has aided in the achievement of a high degree of participation by most of the local jurisdictions. In late 1977, 25 regional VASAP programs are in development and/or operational status; 21 have reached their operational stage, while 4 programs in the planning stage are expected to be operational in 1978. These programs are now accessible to 90 percent of the general population and encompass about 90 percent of the licensed drivers within the State.

Each local VASAP has a project director, and a staff which varies in size from 5 to 11 persons. All traffic safety countermeasure activities are used (e.g., police patrols and training, court training programs and workshops, case workers preparing presentence reports, treatment and education programs and instructor training, and public information programs). The local project evaluates its countermeasures and submits the results

to the State VASAP Office. Since the start of the VASAP Program in 1975, DUI arrests have increased from 23,413 in 1974 to 28,500 in 1977.

Since 1970, there have been a series of legal changes which improved the detection and apprehension of drinking drivers.

- In 1970, the General Assembly passed a bill allowing the use of preliminary breath-tests as a screening device for all drivers believed to be driving under the influence of alcohol.
- On July 1, 1972, Virginia amended its DUI law by reducing its presumption for being under the influence from 0.15 to 0.10 percent by weight of alcohol in the blood (BAC).
- On January 1, 1973, The Limited Consent Statute was amended permitting the use of quantitative breath-testing devices in addition to blood testing.

Law enforcement training was expanded in 1975. In addition to the police orientation training for the Fairfax ASAP, the U.S. Department of Transportation 40-hour training package was offered in 1975 for police instructors. Three statewide Police Instructor's Training Seminars have been conducted in 1976. Eighty-five police instructors who completed this training in 1976 returned to their localities to conduct 8-hour seminars for patrolmen and new recruits. Seven hundred and fifty troopers were provided alcohol training in 1977.

Based on the success of the special patrols in the Fairfax ASAP, the Highway Safety Division makes allocations on a special grant basis from highway safety funds to support an increased enforcement effort. Often, this takes the form of overtime pay for patrolmen working an extra shift either at night or over the weekend. In all areas where these special law enforcement patrols have been set up in support of the VASAP program, the arrest rate has increased significantly.

The 1975 VASAP statute permits the judges, at their discretion, to determine the system in which courts will operate as part of the local VASAP operations. In April 1976, the statute was amended to allow the court, either upon the defendant's motion, or by court order, to place the defendant into a therapy program when the court deems the person to be eligible for such program. The 1976 amendment also increased the potential

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## VIRGINIA

amount of the fee from \$150 to \$200 and authorized the local VASAP's to collect additional fees from defendants referred for extended treatment.

The Motor Vehicle Code of 1950 was amended, effective July 1, 1976, to provide that when a court assigns a defendant to an alcohol education program or alcohol treatment or rehabilitation program, or where compliance with the court's probation order is accepted by the court in lieu of a conviction for driving under the influence, every general district court or clerk of a court shall forward an abstract of the record to the Motor Vehicle Commissioner after such assignment or acceptance by the court. This information is posted on the driving record.

In 1977, the Division of Motor Vehicles (DMV) instituted a new procedure for local VASAP's to secure driving records. When the DMV receives a request for a driving record from the police after a DUI arrest, the DMV will automatically send a copy of the driving record to the appropriate local VASAP.

The Driver's Manual contains a BAC chart. The next revision of the manual is expected to contain more information on alcohol and driving.

The 1976 General Assembly strengthened the rehabilitation countermeasure programs by establishing a Divi-

sion of Substance Abuse in the Department of Mental Health and Mental Retardation. The Highway Safety Division encourages the local VASAP projects to contract with the service boards of the new division wherever feasible for the use of their services.

DUI offenders classified as social drinkers or pre-problem drinkers are referred by VASAP to driver education schools. Problem drinkers are referred to treatment facilities. After completion of sessions, all clients are sent back to the court with recommendations which reflect their performance. The number of referrals to alcohol rehabilitation programs has increased from 3,549 in 1974 to 13,557 in 1977.

In 1973, the State Department of Education developed an alcohol and highway safety curriculum for secondary school departments of social studies, health, and driver education. One of the goals of the local VASAP's is to have alcohol education as part of the high school curriculum throughout the VASAP area.

The Highway Safety Division has had an active public information office which develops alcohol and driving brochures, news releases, television specials, and radio spots and films, as part of the statewide highway safety efforts. Telephone and roadside survey data is collected and used for program evaluation.

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# VIRGIN ISLANDS

The Virgin Islands became a participant in the Federal highway safety program as a result of the Highway Safety Act of 1973. Program funding became available and planning began in FY 1974, but actual implementation was not initiated until FY 1975.

Although the annual Work Programs reflected a desire to allocate highway safety funds to alcohol/highway safety, development of most activities in the task descriptions has never materialized.

A bill was submitted to both the 1975 and 1976 legislative sessions relating to "operation of a motor vehicle while in an intoxicated condition." The bill provides for: reducing the BAC from the current 0.15 percent to 0.10 percent; and revoking a motorist's license for refusal to submit to a chemical test. In 1977, a bill was introduced which would aid in establishing and conducting programs designed to deal with the problems of per-

sons operating motor vehicles while intoxicated or under the influence of drugs. Neither bill has passed.

In June 1977, 28 police recruits were hired for the express purpose of selective traffic enforcement. A component of the formal training for these officers will be DWI Enforcement.

Driver licensing improvements regarding alcohol include new questions on the subject added to the written exam in the last 2 years, and the development of a driver history file as part of a comprehensive traffic records system.

The 1976 Driver Education Curriculum guide devotes one section to the use and effects of alcohol. Newly recruited instructors have been provided training on alcohol/highway safety education.

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# WASHINGTON

In the State of Washington, the drinking driver control program is basically centralized in the Washington Traffic Safety Commission. Heads of those State agencies most directly concerned with implementing the State's highway safety program serve on the Commission. The Governor is the Chairman of the Commission. The administrative functions of the Commission are handled by a Director who is also the Governor's Representative for Highway Safety. The Commission has the responsibility of coordinating the alcohol program with both State and local agencies. This program is basically an expanded effort of the NHTSA-sponsored ASAP in Seattle. The principal rehabilitation facilities in the State are the county operated Community Alcohol Centers (CAC's). Forty-four CAC's are in operation at this time, and they receive State funding assistance even though the State is not directly involved in rehabilitation programs.

The State has an implied consent law which was adopted as State law by public referendum, a procedure which allows the public to enact laws regardless of the legislature's action. In addition to this law the Traffic Safety Commission can legally require any political subdivision to submit a comprehensive plan for highway safety before it receives State funding. Thus, the Commission has a great deal of control over the types and contents of drinking driver programs at the local level. Another law gives the Director of Motor Vehicles the power to suspend a person's license if that person has been involved in an alcohol-related offense. This power does not require prior court action before it can be used.

At the present time, over 150 breath-testers are being used in the various enforcement agencies. Also, approximately 15 video tape setups are in operation.

As a followup to the ASAP program, the State Police have adopted alcohol emphasis patrols as an ongoing strategy in all patrol districts throughout the State. The patrols are deployed, insofar as possible, on the basis of alcohol-related arrests and accident histories. Also, as a followup to ASAP, the Seattle Police are continuing their emphasis patrols as well.

All new enforcement officers in the State are required to complete 40 hours of training on the use of breath-testing devices and the enforcement of alcohol-related traffic offenses. As a result of this training, all enforcement officers are more cognizant of the seriousness of the DWI offense and its relationship to the total traffic safety problem.

The courts have either direct terminal or other access to the full driver history records. Judges are required to attend one orientation session each year. Approximately 2 to 3 hours are devoted to the dissemination of alcohol-related information.

The court assigns convicted DWI offenders to Community Alcohol Centers (CAC's) for identification and referral services. Sometimes this referral includes an alcohol information school which is attached with the CAC's. In other cases, the court may refer DWIs to rehabilitation facilities maintained by the State of Washington.

The alcohol information schools are fee supported. In some instances, other rehabilitation and treatment client costs are based on an "ability to pay" formula.

There is a recommended State Driver Education curriculum which devotes one complete unit to alcohol and drugs out of 27 units in the program. In addition, the Department of Social and Health Services has developed specialized alcohol material for grades K-12; an alcohol education guide for teachers has been developed for K-12. Finally, the State enhances alcohol safety education by providing filmstrips, learning activity packages, films, etc.

In the public education and information area, the Traffic Safety Commission and the State police on an annual average produce six full sets of radio and/or television public service announcements; prepare materials to be used on 30 billboards; and issue 25 to 30 news releases. Also, various handouts are produced and distributed, and NHTSA materials are used whenever possible.

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# WEST VIRGINIA

In 1971, a pilot program was begun at Morris Harvey College in Charleston, West Virginia. Under this program, at the discretion of municipal court judges, drivers charged with the first offense DWI were provided the opportunity to attend Countermeasure Schools conducted in Wheeling, Parkersburg, Beckley, Huntington, and Fairmont.

With the enactment of bill No. 144 in 1976, an organized State-coordinated Alcohol and Drug Control Measures Program became operational. The Legislature assigned the Department of Mental Health with the supervision and jurisdiction of this program in cooperation with the Department of Public Safety.

An alcohol director position was established in March 1976, in the Department of Mental Health, Division of Alcoholism and Drug Abuse. The Director interacts with the Governor's Highway Safety Representative in supporting and promoting mutually-needed legislation related to alcohol and highway safety.

The Alcohol and Drug Abuse Division coordinates and monitors the activities of all local countermeasure programs, provides the curriculum for the programs, and provides materials, resources, records maintenance, and instructor training. The Governor's Highway Safety Office works with State and local agencies through the normal processes of developing comprehensive plans and annual work programs.

Special training for all law enforcement officers in the detection and apprehension of DWI's as well as training in use of certified breath-test instruments, is carried out at the State Police Academy. Arrest rates for DWI have doubled since 1970.

The Division on Alcoholism and Drug Abuse has conducted seminars on the DWI program for magistrates and judges.

Since 1976, convicted first offenders can now elect to attend the alcohol countermeasures program and, after having been certified as eligible by the Department of Motor Vehicles, can retain limited driving privileges. If a DWI first offender elects not to participate in this educational and rehabilitation process, the offender's driver's license is revoked for a 6-month period.

The Magistrates/Judges determine the eligibility of an offender for rehabilitation by sending the offender's abstract of judgment and driver's license to the Department of Motor Vehicles where a record search is completed and the offender's record for the past 5 years is certified to the court. With this information, the court makes disposition. Eligible first offenders may be granted the option to attend an alcohol countermeasures school conducted under jurisdiction of the Division of Alcoholism and Drug Abuse. By attending the school, a person can secure a restricted license which allows him to travel to and from work and school.

During enrollment in the countermeasure school, the Michigan Alcohol Screening Test (MAST) is administered to all participants to determine the relative extent of their drinking problem. The results are then used by the counselor working with the participants as a preliminary assessment of his/her drinking problem.

The standardized countermeasure school program consists of six classes, 3 hours in duration, and at least 2 hours of counseling for each offender. The in-class sessions are divided into two parts. The first part of the classroom instruction is the Defensive Driving Course. The second part is Countermeasure Instruction. Each person is encouraged to explore and assess his behavior. In addition, the course enables the individual to test the ramifications of his behavior against the opinions of his peers and those of the instructors.

From mid-1976 to mid-1977, 928 eligible offenders enrolled in the rehabilitation program, with 638 completing the course.

The DWI programs have been established on self-sustaining basis with the basic means of support being provided by the \$35 enrollment fee collected from each participant. Additional grant money has been secured through the Governor's Highway Safety Administration to equip the 15 local programs with necessary material resources.

In the secondary schools, the driver education curriculum guide includes a unit devoted to alcohol traffic safety education. The individual teacher is allowed flexibility in the manner and degree of instruction provided and uses the outline in the preparation of individual

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## WEST VIRGINIA

lessons, materials, and strategies. Each year an updated list of publications and films concerned with alcohol safety is provided each driver education teacher.

There are eight teacher preparation institutions that provide a safety/driver education program. Alcohol education is provided in varying degrees as part of the content of all teacher preparation courses.

The Division of Alcoholism and Drug Abuse, State Department of Mental Health provides bulk materials for distribution to schools and communities. These

materials include pamphlets, booklets, and films. Materials are also received from the Highway Safety Office.

A "Safety Programs Guide" for grades K-12 was developed and distributed in 1973-74 by the State Department of Education. Some local education agencies are also using the Health and Safety sections of a Comprehensive Education Program published and distributed in 1970 by the State Department of Education Publication. Student performance, objectives, recommended learner activities, and teaching suggestions are included in the guide for various age levels.

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# WISCONSIN

The Governor of Wisconsin has created the Division of Highway Safety Coordination within the Executive Branch. The Division Coordinator is assigned the responsibility to plan and coordinate the highway safety aspects of the alcohol and other drug programs. He is advised by a highway safety technical subcommittee on alcohol and other drugs. Membership in this committee includes representatives from related State agencies.

The Division of Highway Safety Coordination has seven field representatives who are responsible to the Highway Safety Coordinator for monitoring and reporting the progress of the alcohol countermeasure projects in their areas.

The federally-funded ASAP in Marathon and Sheboygan Counties (1970-73) provided models for various countermeasures now employed elsewhere in the State. These models have stimulated technical training for improved law enforcement, and judicial and rehabilitation processes.

In 1972, a statute created the authority to establish community boards for mental health, including alcohol and drug abuse. During 1975, the statutes were modified to afford a continuum of care and treatment for intoxicated and alcoholic persons and hold the community boards responsible for providing these services.

An "Interagency Referral Program for the Problem Drinking Drivers" exists through agreement between the Department of Transportation's Division of Motor Vehicles (DMV) and the Department of Health and Social Services Division of Mental Health to provide for early detection, intervention, and treatment of individuals by referring them to community alcohol treatment programs.

The Wisconsin Implied Consent Law provides the authority for enforcement officers to test the blood, breath, and urine of persons suspected of driving while under the influence of alcohol or other drugs for evidentiary purposes. A change in the statutes in 1973 made it presumptively illegal to operate a motor vehicle at 0.10 percent BAC or above. A recent change in 1978 allows the use of preliminary breath-test devices and allows for revocation of up to 1 year for refusing a breath test.

The State Patrol is using selective enforcement strategies on the inter-State and State trunk highway system.

There has been a concerted effort by the State Patrol to train additional chemical breath-test operators, State, and local police in DWI apprehension.

Breath-test devices have been raised from 150 in 1970 to 273 in 1978. There are also 1,514 preliminary breath-test devices in use by the State Patrol and local units of government. These additional units plus increased enforcement activity have resulted in an increase in the number of persons tested from 5,754 in 1970 to 25,000 in 1977.

The conviction rate has increased from 71 percent in 1970 to 87 percent in 1976. The average BAC at arrest has been reduced from 0.23 percent to 0.19 percent in the same period.

The State Patrol Academy has recently raised from 4 to 20 hours the duration of classroom instructions that each patrolman receives on alcohol enforcement.

A statute passed in 1978 allows the penalty for OWI to include compulsory alcohol school attendance. These programs are either voluntary or court ordered and are supported by student fees. For a first OWI conviction, there is a forfeiture up to \$500, with license revocation of from 90 days to 6 months. Only a first offender may be assigned to an OWI Group Dynamics and/or Traffic Safety School in lieu of other penalties.

The courts are required to forward reports on OWI convictions, Implied Consent test refusals, and appeals for hearings on license revocation to the Department of Motor Vehicles. These reports are kept for statistical purposes. In addition, the State maintains a record system using licensing data to follow a person's driving behavior. (Complete driver records are kept for 4 years at the Department of Motor Vehicles.)

The standardization of OWI conviction and sentencing is the goal of training efforts conducted by the State Supreme Court Judicial Education Center. Workshops are conducted for judicial personnel throughout the State on average of four times a year. In addition, manuals are being developed for municipal justices on traffic court procedures.

There is no provision for PSI and there are no special OWI courts, so sentencing of offenders varies from jurisdiction to jurisdiction.

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## WISCONSIN

Statutory authority allows the court to opt for traffic safety school attendance in lieu of revocation, first offense only. However, referral methodology is established and based on the statutory authority granted to the DMV. The DMV's activities include counseling, education, and referral to treatment. The authority to order attendance at a traffic safety school in lieu of license revocation lies with the court. The DMV identifies persons in need of rehabilitation through their driving record, crash reports, applications for licenses, behavioral reports by agencies and links with treatment agencies, and medical reports.

The number of persons completing various components of the Drinking Driver Program—1976:

Education Course (OWI Group Dynamics)	14,768
Driver Improvement Counseling	9,468
Referral to Treatment Agencies	5,200
Outpatient Treatment (various types)	7,000

Student enrollment fees support the educational component of the rehabilitation program. The cost of group dynamics is \$50 per student and basic traffic safety school is \$5 per student. In 1978, there were 14,768 persons assigned to the group dynamics program and 13,225 completed the sessions.

The State maintains a system of followup of driving behavior through licensing system. (Complete driver records are kept for 4 years at DMV.)

Each high school student in Wisconsin receives 3 to 5 classroom hours on alcohol and its effect on driving. The State's driver education curriculum, reaching over 105,000 students per year, requires 30 hours of classroom instruction, 6 hours of driving experience, and 6 hours of in-car observation. Within that requirement, 2 to 3 hours of in-class instruction are devoted to alcohol use and driving behavior. The Wisconsin grades K-12 curriculum includes 3 to 5 hours of alcohol information and is available for statewide use.

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# WYOMING

The State Office of Highway Safety provides full-time coordination for alcohol/traffic safety programs. In coordinating such programs the Highway Safety Office has provided information and made known the availability of alcohol programs to the Wyoming Association of Municipalities as well as the mental health centers of the State.

Mental health centers provide the only rehabilitation for alcohol traffic safety programs. Currently, there are seven mental health centers covering 19 to 23 counties. Four of these centers, covering 13 counties, have received highway safety funding assistance.

Both the Office of Highway Safety and the mental health centers assume responsibilities for public information. Such information is generally disseminated through public service announcements, speeches, and demonstrations to local public groups. The Highway Safety Office has recently contracted with a public information firm to conduct a special effort on alcohol safety.

Driver histories are available for courts, enforcement, and rehabilitation agencies. Other agencies may acquire this information for statistical purposes only. All traffic infractions and accident information is included in the records, most in an automated status. The information is experiencing increased use and soon will be available to online terminal requests.

Law and accident relationships pertaining to DUI are addressed in the driver license manual. Coverage of alcohol matters in the manual received improved emphasis in 1973 with additional emphasis added in 1975.

The driver licensing agency is currently delicensing approximately 600 persons per year for a DUI conviction following a prior DUI conviction. Although records are not available for the years prior to 1976, administrators estimated the 1976 denials to be approximately double the 1970 total. They anticipate further increases as the State's population increases.

Law enforcement agencies are responsible for the apprehension, citation, and testimony in court regarding drinking and driving. Some staff members of all law enforcement agencies are certified as BAC breath-testing

operators. BAC testing devices are available, usually on a mutually available basis, in all 23 counties. Approximately 120 hand-held preliminary breath-screening devices have been acquired and are currently distributed to a sample of municipalities, counties, and Highway Patrol Officers for a pilot test and demonstration. Alcohol arrests have risen from 997 in 1970 to 2507 in 1976.

The State supreme court has supervisory responsibility for all minor courts in the State and appoints a minor court coordinator to oversee their activities. The coordinator is available to exchange information with any local or State agency.

The maximum DUI fine of \$200 may be reduced if a convicted person voluntarily accepts referral to alcohol/traffic safety education or other rehabilitation. Approximately half (about 1,000 of the convicted DUI's), volunteer and are thus referred by the court. Of this number 850 clients have entered alcohol driving schools and 150 have undergone treatment. This referral, along with diagnosis, has become available since 1973 and is increasingly being used.

Seventy-five percent of court referral clients complete the course as scheduled. Five and one-half percent complete the course on an extended basis. Approximately 6 percent do not complete the course and are reported as such to the court, which takes action accordingly.

Disulfiram programs are not an integral part of the alcohol/traffic safety program, but are used within the comprehensive rehabilitation program as necessary.

Mental health centers conduct training as deemed necessary for their program. Therapists and other professionals involved in rehabilitation are graduates of college level schools.

In 1974, an alcohol section was added to the Driver Education curriculum that is used by all high schools in the State. In 1976, the NHTSA package known as "You, Alcohol and Driving" was acquired and is in general use. The combination of the curriculum and the NHTSA presentation are given a minimum of 2 classroom hours. An annual 2-day workshop for driver education instructors includes the subject of alcohol on the agenda.

# GLOSSARY

**AA:** Alcoholics Anonymous

**AAA:** American Automobile Association

**ABA:** American Bar Association

**Alcohol Safety Action Project (ASAP):** A federally-funded demonstration contract financed from funds allocated under Section 403 of the Highway Safety Act.

**Blood Alcohol Concentration (BAC):** The relative proportion of ethyl alcohol within the blood stated in terms of ratio, weight by volume, based upon the number of grams of alcohol per 100 milliliters of blood.

**Blood Alcohol Test:** Any chemical test of body substances used to determine the concentration of ethyl alcohol in blood.

**Chemical Test:** Any method of chemical analysis to measure alcohol in materials of the body for the purpose of establishing alcohol impairment.

**Countermeasure:** A specific activity, or related activities, designed to contribute to the solution of an accident problem.

**Curriculum Guide/Manual:** A publication which describes course content, teaching methods, and instructional materials.

**DMV:** Department of Motor Vehicles/Division of Motor Vehicles

**DOT:** Department of Transportation

**Disulfiram:** A compound used as an aid in the management of selected chronic alcoholic patients who want to remain in a state of enforced sobriety so that supportive and psychotherapeutic treatment may be applied to best advantage.

**Driver Education Course:** A course of study provided by a school system or institution of higher education that is designed to teach individuals to operate a motor vehicle in a safe and efficient manner.

**Driver Education Teacher:** An individual who has been certified by the State education agency as qualified for the teaching of driver education in the school systems of the State.

**DUI:** Driving Under the Influence

**DUIL:** Driving Under the Influence of Intoxicating Liquor

**DWI:** Driving While Intoxicated

**DWUI:** Driving While Under the Influence

**Evaluation:** A process that involves measuring the success or failure of an activity in achieving predetermined objectives, a judgment of value or worth.

**Evaluation Instrument:** Mortimer-Filkins Test and the Michigan Alcoholic Screening Test (MAST). All the instruments are intended to provide an objective evaluation of the DWI, DUI, DUIL, etc. offender with special reference to drinking behavior.

**FARE:** Fatal Accident Reduction Enforcement. A federally-funded Section 403 demonstration contract.

**Fee System:** A system whereby funds for the operation of the alcohol safety project, the court, or the compensation of the judge or other personnel of the court, depends on fines, court costs, or other revenues such as posting or forfeiture of bail or other collateral arising from court cases.

**Funds, 402:** Funds provided under Section 402 of the Highway Safety Act by the Secretary of Transportation to the States on a matching basis for implementation of Highway Safety Program.

**Funds, 403:** Funds allocated to the National Highway Traffic Safety Administration under Section 403 of the Highway Safety Act to provide financial support for research and demonstration contracts.

**Governor's Highway Safety Representative:** The State official who is responsible to and represents the Governor in the conduct of the statewide Highway Safety Program.

**Grant:** A transfer of Federal money, property, services, or anything of value to the State or local government or other recipient, in order to accomplish a public purpose of support or stimulation authorized by Federal statute. Unlike a contract, any direct benefit to the Federal Government is incidental and not the purpose of this arrangement.

**Highway Safety Plan:** The Governor's combined multi-year legislative, organizational, operational, and financial plan, in accordance with uniform standards promulgated by the Secretary, submitted by the State and approved by the Secretary under 23 U.S.C. 402 designed to reduce traffic deaths, injuries and property damage.

Formerly, the Comprehensive Plan and Annual Work Program.

*Illegal Per Se*: A violation that is proved beyond rebuttal solely by proving that the violator had a BAC level that exceeded a statutorily prescribed level.

*IACP*: International Association of Chiefs of Police

*LEAA*: Law Enforcement Assistance Administration, Department of Justice.

*National Driver Register (NDR)*: A file maintained by the Department of Transportation which lists those drivers who have been denied a license or who have had their licenses suspended or revoked.

*NHTSA*: National Highway Traffic Safety Administration, Department of Transportation.

*NIDA*: National Institute for Drug Abuse.

*NIAAA*: National Institute of Alcohol Abuse and Alcoholism, Department of Health, Education, and Welfare.

*OMVUI*: Operation of Motor Vehicle While Under the Influence.

*OWI*: Operation of a Motor Vehicle While Under the Influence of an Intoxicating Liquor.

*Preliminary Breath Test Instrument (PBI)*: A portable instrument that enables a law enforcement officer to determine a driver's BAC at the roadside.

*Presentence Investigation (PSI)*: When used in alcohol safety programs, an activity that provides the court with facts that describe the prior behavior of a person arrested for DWI. The PSI aids the court in identifying problem drinkers and establishes a basis for selecting appropriate rehabilitation as part of the sentence prescribed for the person.

*Presumptive Evidence*: A presumption consists of a relationship between a *basic fact* and a *presumed fact*. The existence of the basic fact gives rise to the existence of the presumed fact. For example, a finding that a driver has a BAC of 0.10 percent is a basic fact which gives rise to the presumed fact that the driver was driving while intoxicated. A presumed fact, however, may be rebutted by sufficient evidence which counters the basic fact.

*Problem-Drinker Driver*: Any individual who frequently makes use of highways after consumption of alcohol, as evidenced through a record of alcohol violations, excessively high BAC, medical diagnosis, substantiated report, or self-admission.

*Rehabilitation*: An alcohol safety school and/or therapy (i.e., group therapy, individual therapy, chemotherapy) program designed to produce some desired change in behavior.

*Selective Enforcement Unit/Patrol*: Special alcohol safety enforcement effort in operation at times and places of the greatest incidence of drinking and driving.

*Social-Drinker Driver*: Any driver whose past driving record, medical record, diagnostic test reports, or self/acquaintance admission do not indicate a history of problems associated with alcohol.

*Standard 308*: Highway safety program standard, Alcohol in Relation to Highway Safety, promulgated by the Secretary of Transportation under authority of the Highway Safety Act of 1966.

*State*: Each one of the States, District of Columbia, Puerto Rico, Guam, Virgin Islands, and American Samoa collectively.

*STEP*: Selective Traffic Enforcement Program. A federally-funded Section 403 demonstration contract.

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